

County Borough of Southampton.

ANNUAL REPORT

ON THE

Health of the

County Borough of Southampton

AND THE

Port of Southampton

For the Year 1935,

BY

J. C. MAURICE WILLIAMS, M.R.C.S., L.R.C.P., D.P.H.,

Medical Officer of Health of the County Borough and Port of Southampton,

Medical Superintendent of the Municipal Hospitals,

Medical Officer to the Education, Public Assistance,

and Mental Deficiency Acts Committees.

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CONTENTS.

	PAGE
Introduction	3
Statistical Summary	20
Population and Meteorology	23
Health Services and Sanitary Circumstances ...	27
Vital Statistics—Births, Deaths, and Infantile Mortality	37
Maternity and Child Welfare	57
Notifiable Infectious Diseases	91
Venereal Diseases	101
Tuberculosis and Cancer	111
Municipal Hospitals and Laboratories	145
Mental Deficiency and Mental Treatment Clinic ...	159
Miscellaneous	169
Housing	175
Sanitary Services and Food and Drugs Acts... ...	191
Port Sanitary Authority	211

Detailed Index pages 265–267.

County Borough and Port of Southampton.

ANNUAL REPORT

OF

The Medical Officer of Health.

To the Mayor, Aldermen and Councillors of the County Borough of Southampton.

Mr. Mayor, Ladies and Gentlemen,

In accordance with the statutory duty imposed upon me as your Medical Officer of Health, I have the honour and pleasure to submit my fifth Annual Report on the health of the community living within the County Borough of Southampton, with observations on the social and climatic conditions influencing public health, and upon the medical services provided by the Council for the prevention and treatment of sickness.

The local health statistics are contained in the body of the Report, and comparisons are made between these and the national rates as supplied by the Registrar-General.

This introduction is meant to be a review embodying the main features of interest that have occurred in the work of the Department during the year, but for a more comprehensive study it is necessary to refer to the main Report which contains the statistical tables, and information which indicates the close co-operation that exists between the Health Department and the Social Services, official and voluntary, in the Borough.

Regarding the vital statistics for the County Borough, the estimated mid-year population for the year 1935 was 177,200, an increase of only 200 over the previous year. There was a further fall in the birth rate. It will be remembered that I made some observations on this matter in last year's Report.

The death rate showed a slight fall, and was below the rate for England and Wales, being 11.44 as compared with a National rate of 11.7.

The infantile mortality rate gave the low figure of 46 per thousand births, as compared with 52.7 in 1934. Our rate for the year was the lowest ever recorded in the Borough, and compares with a rate of 57 for England and Wales. In the 121 Great Towns the infantile mortality rate for 1935 was 62.

Regarding the maternal mortality, it is a distressing fact that the Southampton rate was higher for 1935 than it had been for many years, with a figure of 5.72 per thousand live and still births, as compared with a rate of 3.93 for England and Wales.

The puerperal sepsis rate of 1.43 was below that of 1.61 for England and Wales, but the other maternal deaths advance the Southampton rate to the figure quoted.

As in previous years, each maternal death has been followed by a careful investigation, in order to ascertain the factors concerned in its causation, and whether any of these were preventable.

The deaths from cancer again showed an increase, and in the year under review reached the heavy rate of 1.69 per thousand of the population. In studying the classification of deaths given according to the site of the primary growth, it will be noticed that 18 males died as compared with 1 female from cancer of the buccal cavity and pharynx. There was an appreciable difference in the number who died from cancer of the respiratory organs—14 males, as compared with 3 females. Cancer of the stomach and rectum was more common in males, whereas cancer of the colon showed a higher number of deaths in females. Comparing the year's figures with those of previous years, it will be noted that there is a close similarity in the number dying from this disease for the particular situations of the body, and the proportion of males affected to females is practically constant for each of these sites.

There was during the year an increase in the marriage rate, which is a sign of better economic conditions.

At the end of 1934 and the beginning of 1935 there was a severe epidemic of diphtheria in the Borough. For many weeks between 30 and 40 cases were notified, and although it was not possible to classify all the cases, those that were classified showed a high percentage of the gravis type. Our Isolation Hospital accommodation was taxed to its limit, and I found it necessary to recommend the discharge of all the tubercular patients from our Sanatorium section of the Hospital in order to provide further accommodation. It was also found necessary to request all the medical practitioners in the Borough, whenever possible, t

arrange for scarlet fever cases to be nursed at home, except where the home conditions or circumstances made this undesirable. The agreement that the Council have with certain of the neighbouring Authorities to take in their infectious cases also had to be suspended temporarily ; and the accommodation in the small pox huts and in certain wards at the Borough Hospital had to be utilised for the nursing of diphtheria cases.

There was a good deal of public anxiety in the Borough regarding the epidemic. It was decided that every child attending school should gargle twice a day with a suitable antiseptic solution. This was carried out for a period of four weeks.

Although we inaugurated our scheme of immunisation in 1934, it had not been accepted widely by the public up to the time of this epidemic. The alarm caused by the outbreak was considered to afford an excellent opportunity to impress upon the community the need for immunisation. With this end in view, some of the medical staff were taken off their routine duties to carry out a concentrated campaign for the furtherance of the scheme. After many weeks of intensive work the epidemic was checked, and for the remainder of the year very few cases of diphtheria occurred.

The number of cases of scarlet fever showed a decrease, being 357, as compared with 582 cases in 1934.

The Shellfish Regulations, 1934, came into operation on the 1st January, 1935. In the following December I reported to the Committee that five cases of typhoid that occurred during the year had been traced to an infection from cockles gathered on the foreshore of Southampton Water, and it was decided that an Order should be made prohibiting the gathering of cockles for sale from this area. At the end of the year the preliminary steps were taken to bring this Order into force.

Mr. A. H. Hooley, who had served the Council for 43 years as Chief Clerk, retired on reaching the age limit. Mr. E. F. Light, Senior Clerk, was promoted to this position, and Mr. Masterman was appointed from the Erith Health Department to the position of Senior Clerk. The Council passed a resolution according high appreciation of Mr. Hooley's work during his long period of service, and I shall personally miss his very able assistance in the Department.

Mr. Evans was appointed Aural Surgeon to the Authority, and commenced his duties in January, 1935. In addition to

carrying out Clinics in connection with the School Medical Service, he also visits the Borough and Isolation Hospitals for the purpose of seeing cases in consultation with the Resident Medical Officers.

During the year the Council acquired 268 acres of land at Lordswood for the construction of a Municipal Sports Centre, which will include, in addition to the two golf courses now in use, facilities for the playing of cricket, football and lawn tennis. This Sports Centre will be of the greatest benefit to the youth of the town from the health point of view, and will increase in value as the Borough extends.

I am pleased to note the steady expansion of organized efforts to improve the physical fitness of the younger generation by the establishment of boys' and girls' clubs and physical culture classes. It is in the national interest that these efforts should receive every encouragement and support.

In November a Health Week was held in Southampton, and a full description is given in the body of the Report regarding the proceedings.

Borough Institutions.

In last year's Report I gave in some detail a description of the new Maternity Unit, which it was proposed to build at the Borough Hospital. In November the foundation stone of the Unit was laid by Sir Kingsley Wood, the Minister of Health. I have included in the present Report a sketch plan with a short description of the accommodation that is to be provided. It is hoped that this Unit will be completed by the end of 1936.

Other improvements have been carried out at the Borough Hospital, such as the provision of a cold chamber, an electro-cardiograph, and a mobile X-ray plant.

The new Nurses' Extension was opened by His Worship the Mayor (Councillor G. A. Waller) last July, and provides accommodation for an additional 40 nurses. This Home has been attractively furnished, and all the rooms are provided with a supply of hot and cold water.

Certain structural alterations have been carried out at the Isolation Hospital, and an additional Day Sister has been appointed on the Staff.

The arrangement entered into with the Hospitals' Association regarding the payment for treatment of their cases in the Borough Institutions worked in a satisfactory manner.

Sanitary Department.

The multifarious duties connected with the Sanitary Department were carried out in an efficient manner. The inspections relating to nuisances and drainage take up a considerable time of the Sanitary Staff, but other duties, such as the investigation and disinfection following infectious diseases, visits to dairies, cowsheds, slaughterhouses, milkshops, workshops, and bakehouses, and the sampling of foods, all come within the purview of the Sanitary Department. An additional Shops Inspector was appointed during the year, as a result of which a stricter supervision is being exercised over this side of the work. The housing work at present carried out by the Sanitary Staff materially interferes with the other statutory duties that they are called upon to perform, and it is proposed at an early date to suggest the formation of a separate section of the Department under a Senior Inspector, to carry out the duties which have been entrusted to the Department under the 1925–1935 Housing Acts.

A survey to ascertain the extent of overcrowding is about to be commenced.

It is difficult to estimate the number of overcrowded families with the information at present in our possession, but it is expected that the local situation will not reveal such a high percentage of overcrowded families as one might be led to expect. A new Milk Designation Order has been issued, and will come into operation in June, 1936. The purpose of this Order is to enable the public the better to understand the quality of the various grades, but it is doubtful whether these new designations are going to be as explicit as is contemplated.

A new Mortuary was erected alongside the Disinfecting Station at West Quay. This consists of a post-mortem room, refrigerating plant, storage room, viewing room and chapel. The provision of this new Mortuary is very welcomed by the police surgeons and other doctors who have to perform post-mortem examinations.

Housing.

Further progress continued during the year in the five years' programme under the 1930–35 Housing Acts. Details are given in the body of the Report of each area dealt with during the year.

In May the first batch of new houses at Coxford was completed, and it became necessary to find the most advantageous method of dealing with the displacements from the large Threefield Lane

area, consisting of 130 houses. To expedite the demolition and rebuilding, the whole area was divided into six sections, and arrangements were made for the displacements to take place from each of these sections as notice to vacate became operative.

Two local inquiries were held by the Minister's Inspector during the year relating to 29 clearance areas, comprising 185 houses. All these areas were later confirmed by the Minister, and the occupiers who desired houses were rehoused at Coxford.

In addition to the unfit houses dealt with as areas, 43 houses were represented as unfit individual houses under Section 19, and demolition orders were made in 42 instances. In one case an undertaking was accepted not to use the house for human habitation.

The Housing Committee are considering the question of dealing with the Kingsland area in the near future, either as a redevelopment area or as a number of clearance areas. It is proposed to erect flats when the site is cleared, and these flats will probably accommodate more persons than there are at present housed on the site.

Maternity and Child Welfare.

The Maternity and Child Welfare Service is one of the most important and beneficial of the Social Services established by the Council. It is not necessary to reiterate the work that has been done, both Nationally and Locally, by this service in connection with infant care and child nurture, which has resulted in such a remarkable fall in the infantile mortality rate during the present century. The Maternity and Child Welfare Committee are considering the advisability of building a model welfare clinic in the centre of the town to replace two of the older buildings at present used as Welfare Centres; the question of providing suitable premises in the Coxford and Swaythling areas is also under consideration. There has been in the past a considerable gap between the medical service provided under the Maternity and Child Welfare Scheme and the School Medical Service. Further efforts have been made during the year to correct this deficiency by requesting the medical officers to refer from all Municipal Clinics children who are in need of treatment under the age of five years, whose parents are unable to provide the requisite treatment through their own private practitioners. The Dental, Ear, Nose and Throat, Ophthalmic and other Clinics deal with the cases, which are specially referred to them by the Council's Medical Staff.

There is at present a Bill before Parliament dealing with the question of providing a maternity service by means of salaried

midwives employed by Local Authorities or by Voluntary Associations. In Southampton we are served by an excellent group of women who are at present carrying out this work, but undoubtedly by municipalising this service greater care can be exercised in controlling midwifery, and the practice which at present exists of certain midwives undertaking more work than they are capable of doing efficiently, while others just as competent do not get an equal share of the work, will be avoided. It will be necessary for the Committee, when this Bill becomes Statute, to remunerate and place the salaried midwives on an equal status to that given to the Health Visitors.

When our new Maternity Unit is completed, we shall have every facility to deal with cases needing institutional treatment. The Unit will be run in connection with the Borough Hospital, and the Visiting Obstetrician and Gynæcologist will have the cases under his clinical supervision. It is also intended to enlarge our training centre by admitting additional pupil midwives, and arranging a period of residence for the midwives employed by the Corporation as a post-certificated course. The practice of giving lectures was introduced some years ago, and during the year under review was continued through the help of the Secretary to the Local Midwives' Association. The lectures were well attended, and were, I believe, much appreciated by the practising midwives in the Borough.

The fact of a municipal service being established will not interfere unduly with the general medical practitioners. From statistics it is shown that approximately 70% of the confinements taking place in the Borough are at present attended by midwives in general practice. There was again this year a further fall in the number of births registered. This fall has been practically continuous during the past ten years, and, with the fear of a decreasing population, it is distressing that persons who can often best afford to rear children under good conditions are limiting their families to one or two children.

Mrs. A. B. Barrow, on reaching the age limit, retired from the position of Superintendent Health Visitor and Inspector of Midwives after many years' service with the Council. She will be very much missed by the mothers and others with whom she came in contact, and to whom she was always of such great assistance. Miss C. M. Ritchie was appointed to this position, and commenced duty in August, and Miss Evans, of Oldham, was appointed to the position of Assistant Superintendent and Inspector of Midwives.

The practice of providing Home Helps during confinements has grown during recent years. Undoubtedly many mothers find this service of great benefit, as it relieves them of the anxiety of looking after the home during this period; 163 such cases were provided with Home Helps.

Special attention has been paid to the Inspection of Nursing Homes, and quarterly reports have been submitted to myself by one of the Lady Assistant Medical Officers and the Inspector of Midwives, on various points concerning the efficient running of the registered homes. Whenever any sanitary defect or any other matter prejudicial to satisfactory conduct of the home has been found, the person registered as having charge of the home has been required to correct the fault.

During the year Mr. Knowlton was appointed a part-time Obstetrician and Gynæcologist of the Council. According to present arrangements, he attends three sessions a week, two at East Park Terrace and one at Sydney House, where he sees ante-natal and post-natal cases, and gives advice on birth control when the health of the patient necessitates it. He also visits the Maternity Home and the Borough Hospital in connection with gynæcological and obstetrical cases, and acts as a consultant when a second opinion is required by the medical practitioner.

The Child Welfare Centres dealt with 1,170 babies under the age of one year as new cases, the total number of medical consultations being 18,562 at the eight Municipal Welcomes. I should like to acknowledge the valuable assistance given by the voluntary workers at these Centres.

The Clinic at 23 East Park Terrace serves as a Centre to which cases are sent from the various Welfare Centres by the Medical Officers, where a child is in need of definite medical advice, apart from feeding troubles, etc.

As an experiment, it was arranged that meals should be provided at one of the Meal Centres established by the Education Committee for necessitous mothers during the ante-natal period.

To the time of writing this Report, very few women had availed themselves of this service, owing to the difficulty of leaving their homes.

Venereal Disease Services.

It can, with confidence, be said that the Venereal Disease Department provided by the Council has one of the best equipped Clinics in the country to deal with these diseases in both male

and female patients. The male centre, erected at East Park Terrace in 1932, was based on a model Clinic designed by Col. Harrison, of the Ministry of Health. This Clinic provides all the facilities necessary for carrying out the requisite treatment for these diseases. The attendances of patients at the Clinics increased to 37,292, as compared with 35,414 in 1934, and since the re-organisation of the Department, which took place in 1932, the attendances have risen from 13,632 to the figure quoted. It is of material assistance in the treatment of these diseases that we have available special wards at the Borough General Hospital. A total of 116 patients were admitted during the year, and whilst in Hospital these patients are kept under the clinical supervision of the Venereal Diseases Officer, working in conjunction with the Resident Medical Superintendent. It is pleasing to find that the general practitioners are co-operating so well with the Department in referring cases for treatment in the earlier stages ; so, too, do the Voluntary Hospitals in the town. Of the total number that attended, over 40% were referred from these sources. The close connection between this Department and other Departments of the Council's health services is also of great advantage. The School Medical Officers during their routine and other inspections come across children whom they suspect to be suffering from inherited syphilis, and at intervals these children are collected at the School Clinic and examined by the Venereal Diseases Officer, who carries out the necessary blood tests, etc., and where an infection is found to be present, he is able to apply the appropriate treatment. The same can be said of the Ante-Natal Clinic and the Maternity and Child Welfare Centres, where the Medical Officers, when they suspect infection, can immediately refer the case to this Department.

Regarding the incidence of Venereal Disease among the sea-going population, the Shipping Companies have been asked to encourage their Ships' Surgeons to attend the Clinic for the purpose of instruction and discussion of particular cases with the Venereal Diseases Officer. The question of establishing a Prophylactic Centre in the neighbourhood of the Docks is a matter for consideration, especially if the Shipping Companies can be induced to contribute something towards its maintenance. This would undoubtedly benefit them by preventing a disease which cripples certain members of the crew. This Centre could be used as an Irrigation Centre for those seamen unable to get away from their vessels long enough to attend at the East Park Terrace Centre. It is found from statistics that at least 40% of the initial infections arise in our town, and by the establishment of this Centre, many of these cases could be prevented. There would be in attendance a qualified attendant working under the Clinical Venereal Diseases Officer. It is pleasing to note that the old

practice adopted by some of the Shipping Companies of discharging and not re-engaging any man suffering from these diseases, has been discontinued to a great extent ; thus the men are not reluctant to report their condition immediately to the ship's doctor. The practice on board many of the passenger boats in the past was for one of the Hospital attendants to treat the cases without the knowledge of the surgeon, with the result that much damage was done to the patient.

The greatest difficulty we find in connection with this work is to persuade patients to attend for continued treatment until we can, with some confidence, state that a cure has been effected. Unfortunately, the defaulter rate, especially those suffering from gonorrhœa, is still high. At least one-fifth of those originally attending cease to do so before a certificate of discharge is given. In the case of females who default, we find that Health Visitors are of great assistance in going around and endeavouring to persuade them to continue their treatment. Under our present legislation, it is practically impossible to control the prostitute class, and as these are the chief source of infection, they are a menace to the community. The existing legislation does not allow the Authority to take any action against these persons.

Tuberculosis.

I am pleased to report that the Tuberculosis Service has made steady progress during the year, and that the mortality rate from Pulmonary Tuberculosis is the lowest ever recorded in the Borough. Although still above the rate for England and Wales, there is an indication that our mortality figure in future will compare favourably with towns of similar size and situation. Apart from the fact that Southampton is a seaport, and a higher proportion of seamen suffer from Tuberculosis as compared with other occupations, there appears to be no other reason, climatic or social, why the Southampton rate should remain above the average, taking into account its position in the South of England, its numerous open spaces, and absence of slum conditions to the same extent as some industrial towns which have lower morbidity and mortality rates.

As will be seen from the statistical tables, the number of primary notifications continues to be high. This is an indication that medical practitioners are referring cases to the Dispensary at the earliest stages, and it is only by early notification and treatment that the department can hope to achieve the best results by providing Sanatorium treatment, or by one of the operative methods now being used for the treatment of the disease, which gives to those early cases every chance of a complete cure.

It will be observed in the section dealing with childhood Tuberculosis that a great number of children have been notified as suffering from Pulmonary Tuberculosis. This matter has been the subject of a special report to the Committee, and although it is not generally accepted that children suffer from Pulmonary Tuberculosis to the extent of our present incidence in Southampton, the Clinical Tuberculosis Officer holds the view that these children are suffering from a definite infection of the hilar glands, which, unless checked at the earliest stage, will in a great many cases develop into active tuberculosis during adolescence. It was for this reason that the Committee agreed to send a number of children, averaging between 40 and 50 at one time, for treatment in a sanatorium school. Arrangements were made with the Nayland Sanatorium, at Colchester, to take in our cases at a weekly maintenance rate, and towards the end of the year the Health Committee considered the question of purchasing an estate for the purpose of establishing their own sanatorium school. After this had received very careful consideration, it was decided to defer the matter in order to be in a better position to judge the results of the present experiment after a reasonable trial period.

The total attendances at the Dispensaries numbered 12,453. Sydney House Clinic serves as a useful centre for those living on the east side of the River Itchen, and there special waiting and consulting rooms have been provided, so that the other activities undertaken at this centre are not interfered with. In 1933 the total attendances at Sydney House were 565. In 1934 they had increased to 2,155, and for the year under review there was a further increase to 2,637. The medical practitioners sent to this centre 141 new patients and 145 contacts, as compared with 49 new patients and five contacts in 1933.

The Health Visitors play an important part in carrying out propaganda work and in giving advice to the patients. During the year they paid 7,246 visits in connection with the work of the Tuberculosis Department.

Concentrated attention has been paid to the examination of contacts since the re-organisation of the Department, and a total of 659 such cases were examined by the Clinical Tuberculosis Officer. Of this number, 32 were diagnosed as definitely suffering from Tuberculosis, and 233 were kept under continued observation. It is likely that had this side of the work not been developed, the majority of these 32 cases would not have been treated for some considerable time, with the result that their chance of a cure would have been very much lessened.

In last year's Report I gave a detailed description of the proposed extension to the sanatorium section of the Isolation Hospital. Towards the end of the year work was commenced on the new pavilion, and it is hoped that it will be completed towards the end of 1936. A description, together with a sketch plan, is given in the section of the Report dealing with the Tuberculosis Service, and from this plan it will be seen that the new pavilion will provide accommodation for 36 patients. It is also an advantage that it will have in connection with it an X-Ray plant and operating theatre, so that many of the patients will be able to attend for pneumothorax treatment, etc., as out-patients.

The Department has recommended extra nourishment to be provided through the Health Committee to a number of early cases whom the Tuberculosis Officer has considered are not receiving sufficient nourishment at home. This has been done in accordance with the recommendation issued by the Ministry of Health, and avoids the necessity of these patients applying to the Public Assistance Department.

The Housing Committee, in conjunction with the Health Committee, have definitely decided on a scheme to re-house in suitable dwellings certain of the tuberculosis patients at present living in unsatisfactory surroundings. It is hoped that when overcrowding is abated under the 1935 Housing Act, that this will also assist in reducing the incidence of tuberculosis.

Regarding Non-Pulmonary Tuberculosis, the Council are making every effort to combat this disease by instituting quarterly inspections of cows in the Borough by a Veterinary Surgeon, who carries out the necessary tuberculin test where the clinical condition of the cow indicates the necessity. Periodical samples are taken from the milk brought in from the surrounding areas, and where a positive sample is found by means of guinea-pig inoculation or bacteriological examination, the Authority concerned is notified.

Children receive in-patient treatment at the Lord Mayor Treloar's Hospital, at Alton, and out-patient treatment is given at the weekly Clinics held at 23 East Park Terrace. In this connection the Committee are considering the question of erecting an up-to-date Orthopædic Centre for out-patient treatment and remedial exercises.

An important investigation has been carried out during the year relative to the incidence and mortality rates of Pulmonary Tuberculosis in the sea-going population. Statistics are given showing the position regarding this class of employment as compared with other forms of occupation. Ship owners should be compelled to provide better living accommodation for the crews.

What are being condemned as slums on shore, are as palaces compared with the quarters provided on some of the smaller cargo boats.

An assistant Resident Medical Officer was appointed during the year, whose duties are chiefly concerned with the treatment of Tuberculosis in the Sanatorium.

PORT SANITARY SERVICE.

I am pleased again to be able to report the absence of any major infectious disease on board any of the vessels entering the Port of Southampton during 1935. This is especially noteworthy when it is realised that no fewer than 15,669 vessels arrived at the Port, many of them from places where such major infections as Small Pox, Typhus and Plague are endemic.

Although this satisfactory state of affairs has now obtained for many years, the Port Sanitary Service does not relax its vigilance, and the Medical and Sanitary Officers visit every ship, both passenger and cargo, and examine every case of illness reported by the captain or ship's surgeon.

Dr. T. A. Seekings vacated his appointment, after seven years' valuable work in the Docks, on being appointed Medical Officer of Health to the County Borough of Barrow-in-Furness. Dr. G. E. B. Payne, of Southend-on-Sea, was appointed to fill the vacancy, and commenced his duties in November last.

Dr. A. G. Caldwell, who had also rendered useful service, retired on reaching the age limit after twelve years as an Assistant Port Medical Officer, and was succeeded by Dr. S. Chalmers Parry.

The main feature of interest that occurred during the year from the point of view of the Port Sanitary Department was the confirmation by the Minister of Health of a new Southampton Port Sanitary Order, which replaced the previous Order made in 1893. The new Order came into operation on the 1st October, 1935, and increased the area of the Authority's jurisdiction. The reason application was made for this new Order was to safeguard the legal position of your officers in boarding and dealing with ships calling in Cowes Roads for the purpose of disembarking passengers for Southampton.

The limit of the eastern boundary of the Authority's area now extends from Ryde Pier in a northerly direction to a point midway between Ryde and Portsmouth, where the boundary takes the same line as the western limit of the Portsmouth Port Sanitary area. The western boundary has also been extended; and to the south a part of what was previously within the jurisdiction

of the Cowes Port Sanitary area has been included, so that there is now no likelihood of any ship, however large, being boarded by your officers without full legal authority.

The value of this extension will be appreciated when it is realised that 182 vessels landed passengers outside our jurisdiction during the nine months of the year prior to the Order becoming operative.

It will be noticed from Table A, given on page 216, that the total net tonnage of vessels using the Port during the year increased by nearly 600,000 tons, although there was only a very slight increase in the number of foreign vessels, and a decrease in the number of coastwise vessels.

Regarding the sanitary defects found on board ship, more or less the same procedure is adopted in dealing with these defects as is applied to the defects found in a dwelling-house. The Sanitary Inspector reports the matter to the captain verbally, and if his recommendations are not carried out, the matter is reported to the Port Medical Officer, who issues a notice on the captain requesting the defects to be remedied within a certain definite period.

Out of a total number of vessels inspected during the year, 108 were found with some sanitary defects, and in 86 of these the defects were remedied.

The Authority makes a practice when a ship leaves this Port without the defects having been corrected of notifying the facts to the Port Medical Officer of the Port for which the ship is bound, and he is asked to inform us of the result.

Regarding the incidence of infectious disease on the 15,669 vessels entering the Port during the year, 167 reported one or more cases prior to, or at the time of, arrival. All these cases were seen by myself or by one of the boarding Medical Officers, and appropriate steps taken regarding disposal, either to the Isolation Hospital, or in certain of the mild infections they were allowed to proceed home in a private car, as long as the Medical Officer was satisfied that there was no possibility of the infection being spread.

The number of infectious cases landed from vessels showed a slight increase on last year. In the returns it will be noticed that there were fewer cases of Influenza—only four, as compared with an average of 12.6 during the last ten years. There was

also a decrease in the number of cases of Pneumonia reported, being 18 as compared with an average of 31.8 during the last ten years. The same number of Typhoid and Para-Typhoid cases were reported as in 1934.

Concerning the passenger traffic during the year, there was an appreciable increase, inward and outward, of the first, second and tourist classes from places out of Europe, but there was a decrease in the number of third class passengers. There was an increase, both inward and outward, in the European traffic, but a slight decrease in the number of passengers travelling to and from the Channel Islands.

Southampton is becoming one of the main ports in Great Britain for the use of vessels going on pleasure cruises. A number of these vessels, on return from Mediterranean cruises, report small outbreaks of enteritis amongst the passengers. This seldom applies to any member of the crew. Many explanations of these mild outbreaks are given, such as change of climate, change of food, lack of exercise, eating of fruit and salads, etc., in foreign ports. As an Authority, we have on certain occasions found pollution of the ship's water, and it cannot be stressed too forcibly that every care should be taken in the refilling of the water tanks in foreign ports, and a certificate of purity should be required by the shipping company from a competent bacteriologist. Furthermore, the strictest personal supervision by the ship's officers should be exercised in the refilling of the tanks, to avoid the possibility of contamination by natives and others employed on this work. It would also be an advantage if the shipping companies issued a printed list of articles of food which should be avoided by passengers when visiting foreign ports, and a list of reputable restaurants where meals can be taken ashore with comparative safety.

The Port Sanitary Regulations of 1933 have assisted us materially in our administrative duties. These Regulations have definitely improved the status of the Port Sanitary Staff, giving us authority to deal with infection and other matters within the purview of a Sanitary Authority. The question of boarding and freeing a ship prior to these Regulations was rather ambiguous in so far as the Customs Officers were the only officials recognised by Statute for this work. In Southampton, I am glad to say our relationship with H.M. Customs has always been of the friendliest, and I would like to acknowledge the support received by my department from H.M. Collector and his staff.

The reception of wireless messages prior to a ship's arrival, giving information as to the state of health on board, has also been of the greatest value to the Medical Officers, and facilitates considerably the preparation for dealing with any infectious case.

The rat incidence in the Docks and on board ship again shows a considerable decrease. A total of 1,017 rats were caught during the year, as compared with 9,908 in 1925. There has been a definite decrease each year since that date, due, I am convinced, to the efficient rat-proofing carried out by the Shipping Companies. Under the Deratisation Order, we, as a Port Sanitary Authority, issue Deratisation Exemption Certificates to those vessels where we find that the rat incidence is low, and this obviates the necessity of carrying out a fumigation such as was required by the United States and other countries prior to the International Agreement on this matter. It was not necessary for the Authority to request any vessel to be fumigated during the year, but 15 vessels were fumigated by the owners, 3 of these in order to get rid of cockroaches.

Following our inspection of a vessel prior to the issuing of a Deratisation Exemption Certificate, we submit to the Shipping Companies a list of work necessary to bring the ship up to a rat-proof standard, and I would like to thank the Shipping Companies for the efficient manner in which they have fulfilled our requirements.

The Parrots (Prohibition of Import) Regulations still continue to operate. One parrot died while under detention in the Port Sanitary Office, and was sent to the Government Laboratory for the purpose of ascertaining whether or not it had suffered from Psittacosis. The report received indicated that this infection was not the cause of death.

Regarding the inspection of imported foods at the Docks, one of the Sanitary Inspectors devotes the whole of his time to food inspection. He takes samples of various foods, and from time to time submits them to the Borough Analyst for examination. He also brings to the notice of the Medical Officers any consignment of food which he considers unfit for human consumption. The total amount of food condemned during the year was 130 tons, and in no instance did the consignees question the Authority's decision, and the food was surrendered and destroyed under the Authority's supervision.

Some years ago we experienced, like other ports, a great deal of trouble with carcases of mutton and lamb affected with a disease known as Caseous Lymphadenitis. There is, however,

a considerable improvement in the condition of the carcases now arriving, as they are submitted to a stringent examination by a Veterinary Officer prior to exportation.

The continued expansion of the shipping trade of Southampton makes it essential that the standard of health in the Port should be kept at the highest possible level. This, of course, is only one of the many reasons, both National and Local, for the provision of an efficient Port Sanitary Service.

I would like to express my very warm thanks to the Chairmen and Members of the Corporation Committees concerned with the work of the Health Department for the courtesy and kindness with which they have received the many suggestions and recommendations that I have placed before them during the year; and to the Members of my Staff I give my best thanks for their conscientious and efficient work.

I am, Mr. Mayor, Ladies and Gentlemen,

Your obedient Servant,

H. E. Maurice-Williams.

Medical Officer of Health.

REPORT.

STATISTICAL SUMMARY FOR THE COUNTY BOROUGH OF SOUTHAMPTON.

Area (land and inland water). Acreage					9,599
Area (including tidal water and foreshore)					11,109
Census Population, April, 1931					176,007
Population, estimated (middle of 1935)					177,200
Number of structurally separate dwellings (Census 1931)—					
Occupied				38,080	
Unoccupied on night of Census				1,125	
					39,205
Total private families therein (Census 1931)					45,550
Estimated numbers of structurally separate dwellings end of 1935					43,737
Rateable value (March, 1936)					£1,501,316
Sum represented by a penny rate					£5,760

Births—

Legitimate	Males	1,316	Females	1,255	Total 2,571
Illegitimate	Males	65	Females	60	Total 125
		1,381		1,315	Total 2,696

Birth-rate	15.26
Deaths	2,020
Death-rate (Crude)	11.44
Death-rate (Revised for age and sex incidence) ...	11.32
Number of women dying in, or in consequence of, childbirth	from Sepsis 4; other causes 12

Deaths of infants under one year of age per 1,000 births—
Legitimate, 42.4 ; Illegitimate, 120.0 ; total, 46.0.

Deaths from Measles (all ages)	3
Deaths from Whooping Cough (all ages)	6
Deaths from Diarrhœa (under 2 years of age)... ...	12

Death-rate from Tuberculosis, Cancer and maternal mortality in Southampton and England and Wales during the year 1935 :—

Per 100,000 Population.

	Southampton.			England and Wales. (provisional rates).		
Respiratory	Males.	Females.	Persons.	Males.	Females.	Persons.
Tuberculosis	110.7	58.3	83.8	72.2	49.8	60.5
Other Tuberculosis	8.1	6.6	7.3	12.6	10.1	11.3
Cancer	184.2	155.2	169.3	157.8	159.5	158.7

Maternal mortality (deaths primarily classed to Puerperal conditions) :—

	Puerperal Sepsis.	Others.	Total.
Southampton—			
Per 1,000 live births ...	1.48	4.45	5.93
Per 1,000 total births ...	1.43	4.29	5.72
England and Wales—			
Per 1,000 live births ...	1.68	2.42	4.10
Per 1,000 total births ...	1.61	2.32	3.93

Population and Meteorology.

POPULATION.

The enumerated population at the Census taken at midnight, 26th/27th April, 1931, was: Males, 85,478; females, 90,529; total, 176,007; an increase of 15,013 when compared with the Census, 1921.

The Registrar-General estimates that the population of the County Borough at the middle of 1935 to be 177,200, showing an increase of 200 only over the year 1934, and an increase only of 1,193 persons in the four-and-a-quarter years since the Census. The actual increase of births over deaths belonging to the Borough for the same period was 2,976. The number of new houses that have been completed since the Census is 4,788 as required for the needs of the town, and this would further indicate that the population has been under-estimated.

As previously stated, the Registrar-General's estimate is based on the Census population, after allowing for the varying rate of natural increase as evidenced by the births and deaths, and of migration, as indicated from other sources of information, such as change in the number on the Parliamentary Register and the migration returns obtained from the Board of Trade.

METEOROLOGY.

The weather conditions for the year 1935 were variable in character, the best periods of the year being July and August. July was sunny, warm and dry; August warm and dry on the whole, but becoming unsettled towards the end of the month. The remaining months from September provided much rain.

The sunshine recorded in Southampton was 1,579 hours, compared with 1,602 hours for the year 1934. July was again the warmest month, when 279 hours of sunshine were recorded with an average of 9.01 hours per day. The average per day for 1934 was 9.28.

The rainfall for the year was 41.22 inches, the average for Southampton being 30.94. The greatest fall took place in the month of November, when 7.88 inches were recorded.

The mean temperature of the year, 51.2 degrees, was 0.4 above the average.

An abstract taken from the monthly weather reports forwarded by the Meteorological Office is appended, and gives particulars of the weather conditions relating to Southampton for the year.

Summary of the Records of Temperature, Rainfall and Sunshine in Southampton during the year 1935.
Abstracted from the Monthly Weather Reports of the Meteorological Office.

Month	AIR TEMPERATURE IN DEGREES FAHRENHEIT.								RAINFALL.						BRIGHT SUNSHINE.		
	Means of		Means of A and B.	Deviation from Normal.	Absolute Maximum and Minimum.				Total Fall.		Deviation from Normal.	Most in a day.		No. of days on which 1mm. or more fell.	Hours per day.		Per cent. of possible.
	A Max.	B Min.			Max.	Date.	Min.	Date.				Amt.	Date.		Daily Mean.	Deviation from Normal.	
									Ins.	Mm.	Mm.	Mm.					
January ...	45.8	36.5	41.1	0.0	55	2nd	28	28th & 29th	0.81	21	—47	5	11th	7	2.21	+0.46	26
February ...	49.0	37.6	43.3	+2.0	56	2nd	26	9th	3.71	94	+36	18	24th	15	2.27	—0.37	23
March ...	51.2	37.0	44.1	+0.2	62	20th & 21st	26	9th	1.01	26	—32	5	1st	8	3.86	—0.07	33
April ...	54.5	41.6	48.0	+0.2	63	23rd, 30th	31	5th	3.38	86	+39	16	15th	17	4.39	—1.26	32
May ...	61.0	44.8	52.9	—2.2	76	6th	35	14th, 17th 19th	1.47	37	—14	12	30th	8	5.95	—1.10	38
June ...	66.1	53.6	59.9	+0.8	84	24th	45	16th	4.18	106	+55	31	6th	16	6.65	—0.65	41
July ...	74.7	56.4	65.5	+2.8	87	14th	49	21st	2.37	60	+ 2	53	1st	3	9.01	+2.07	56
August ...	72.3	54.4	63.3	+1.4	82	6th	43	29th	2.32	72	+ 5	29	24th	7	6.73	+0.36	46
September ...	65.2	53.2	59.2	+1.1	68	1st, 27th and 28th	41	26th	3.94	100	+45	15	16th	20	5.04	—0.43	40
October ...	56.9	45.3	51.1	—1.0	63	28th	31	21st	5.75	146	+46	37	3rd	15	2.74	—0.79	26
November ...	51.1	41.1	46.1	+1.6	60	3rd	30	25th	7.86	200	+120	31	16th	20	1.54	—0.85	17
December ...	44.4	36.3	40.3	—1.8	52	1st, 26th	22	21st	3.92	99	+ 6	12	30th	13	1.34	—0.20	17
Year ...	57.6	44.8	51.2	+0.4	87	14th July	22	21st Dec.	41.22	1047	+261	53	1st July	149	4.33	—0.22	35

General Provision of Health Services, and Sanitary Circumstances of the Area.

GENERAL PROVISION OF HEALTH SERVICES FOR THE AREA.

The following particulars are inserted by the request of the Ministry of Health.

Hospitals provided or subsidized by the Local Authority.

A. (1) Borough Hospital.

This Hospital, previously known as Shirley Warren Infirmary, was on the transfer of the functions of the Poor Law Guardians under the Local Government Act, 1929, appropriated by the County Borough Council for the purpose of a general Hospital, and for the reception of the sick under the Public Health Acts. The administration and control of the Hospital were placed by the Borough Council under the Health Committee.

The number of beds provided is 450, allocated as follows :—

Medical	64	Venereal Disease ...	52
Surgical	59	Tuberculosis ...	45
Children	54	Maternity	8
Chronic sick ...	168		

A detailed Report on the Borough Hospital is given on pages 146-152.

(2) Fever Hospital.

The Fever Hospital, known as the Southampton Isolation Hospital, which was opened in 1900, is situated at Millbrook within the County Borough.

The Hospital is constructed of brick, and stands on high ground, sloping to the south. The buildings consist of entrance lodge, out-bathing station, mortuary, administration block, five pavilions, one of which was erected in 1905, laundry, ambulance block, disinfector, and other buildings. In addition to this accommodation there are two huts, containing 16 beds each, which were erected for the reception of military cases in 1916, and one additional brick pavilion of 12 beds, for the reception of Tuberculosis cases, was erected in 1919.

The total number of beds provided is 171, and 25 cots ; 48 beds are set aside for the treatment of Tuberculosis cases with the approval of the Ministry of Health.

Provision has been made for any future extensions necessary, the buildings having been arranged with that end in view. The original site contained 10$\frac{1}{4}$ acres, and in 1915 the Corporation acquired the adjoining land and buildings which comprised an area of about 44 acres.

3) Small Pox Hospital.

The Small Pox Hospital is situated at Millbrook Marsh, on a triangular piece of land 21.30 acres in extent. It is bounded on the south side by the Southampton Water, on the east by the new Docks Extension, and on the north side by the railway line. Accommodation for 30 cases is provided in three huts, and one observation hut. Staff quarters, disinfection hut, laundry, and other offices are provided.

The land has been divided into three portions: 5.76 acres for the Small Pox Hospital, 13.75 acres for sewage disposal works for the western district of the Borough, and 1.25 acres reserved for a recreation ground. A strip of land, 0.54 of an acre in extent, has been disposed of to the Southern Railway.

B. (1) Tuberculosis.

Forty-eight beds are available for the treatment of cases of Tuberculosis in two pavilions set aside for this purpose at the Isolation Hospital. A new block of buildings for the treatment of Tuberculosis at the Isolation Hospital is in course of erection, and will provide a further 36 beds.

Forty-five beds are also provided in the Borough Hospital for the treatment of Tuberculosis. The beds are chiefly used for the treatment and isolation of advanced cases.

(2) Maternity.

Beds are provided by the Local Authority at the Municipal Maternity Home, No. 2 East Park Terrace, for the treatment of maternity cases. Until the end of March, 1930, only six beds were available. The Home has now been extended to accommodate nineteen maternity cases. Central heating has been provided, and the premises redecorated and refurnished. A Maternity Ward of eight beds is also provided at the Borough Hospital. A new block of buildings forming a Maternity Unit and providing for the accommodation of 42 patients, it is hoped will be completed at the Borough Hospital by the end of 1936.

Ambulance Facilities.

(a) For Infectious Cases.

Three motor ambulances, with the necessary staff for the removal of infectious cases, are provided by the Corporation.

(b) For Non-Infectious and Accident Cases.

Three ambulances are provided by the Public Assistance Committee, and are used for the removal of cases to the Borough Hospital.

For non-infectious and accident cases, an ambulance is provided by the Fire Brigade and by the Red Cross Society.

Clinics and Treatment Centres.

The following Clinics and Treatment Centres are provided by the Local Authority :—

Maternity Centre and Infant Clinic...	No. 23, East Park Terrace.
Ditto	Sydney House, Bitterne.

Eight Welcomes for Mothers and Infants are provided, and are situated at Winton Street, Millbank Street, Northam, Albert Road, St. James' Hall and Rechabite Hall, Shirley, Hampton Park, Woolston, and Sydney House, Bitterne.

Tuberculosis Dispensary (See pages 113-141).	No. 1, East Park Terrace.
Ditto	Sydney House, Bitterne.
School Clinic (see separate Report)	East Park Terrace.
Ditto	Sydney House, Bitterne.
Ditto	Swaythling.
Ditto	Shirley Warren.
Treatment Centre for Venereal Diseases (see pages 102-110).	East Park Terrace.
Ditto (Females)	No. 23, East Park Terrace.
Ditto (In-Patients)	Borough Hospital.

Professional Nursing in the Home.

(a) GENERAL.

Nursing is provided by the Queen Victoria Jubilee Nurses' Institute for cases brought to their notice by the Health Visitors. A grant is made by the Council to the Institute in aid of this work. Particulars of their work are given on pp. 67-68.

(b) INFECTIOUS DISEASES.

Cases where proper isolation or adequate nursing arrangements cannot be provided at homes are removed to the Isolation Hospital for treatment. Cases of Measles and Chicken Pox and other diseases coming to the knowledge of the Department are visited by the Health Visitors, and, if necessary, removed to the Isolation Hospital. Disinfection is carried out at the home after removal or recovery of cases, and the bedding and other articles removed to the West Quay Disinfecting Station.

Midwives.

No practising midwives are employed by or subsidized by the Local Authority. The number of midwives practising in the area is 48, all of whom are certificated midwives.

Maternity and Nursing Homes.

The following is a record of the action taken during the year :—

(1)	Number of applications for registration ...	4
	Ditto withdrawn	1
(2)	Total Number of Homes registered ...	32
(3)	Number of orders made refusing or cancelling registration	nil
(4)	Number of appeals against such orders ...	nil
(5)	Number of cases in which such orders have been	
	(*a*) Confirmed on appeal	nil
	(*b*) Disallowed	nil
(6)	Number of applications for exemption from registration	3
(7)	Number of cases in which exemption has been granted :—	
	(*a*) Granted	3
	(*b*) Withdrawn	nil
	(*c*) Refused	nil

Chemical Work.

The chemical work is carried out by the Public Analyst in the Borough Laboratory.

Legislation in Force.

Local Acts dealing with Sanitary Matters :

The Southampton Improvement Act, 1844. The Southampton Corporation Act, 1910. The Southampton Corporation Act, 1931.

General Adoptive Acts.

Public Health (Amendment) Act, 1890, except Part IV. Public Health (Amendment) Act, 1907. Public Health Act, 1925.

Bye-Laws.

Common Lodging Houses ; Houses let in lodgings ; Slaughter-houses ; New Streets and Buildings ; Drainage of existing houses ; Tents, vans, sheds or other similar structures ; For the prevention of nuisances arising from snow, filth, dust, ashes and rubbish, and for prevention of keeping of animals on any premises so as to be injurious to health ; Spitting in public places.

NEW MORTUARY.

The new Mortuary, the erection of which was approved b the Council early in the year, is nearing completion, and it i anticipated that it will be ready for use at the beginning of 1936.

A few particulars of the proposed Mortuary were given in m Annual Report for the year 1934, and the following is a shor description of the new building.

The new Mortuary is a pleasant, red brick building, lying wel back from the road, on land adjoining the Disinfecting Station a West Quay. It consists of a large receiving room, complete wit a refrigerating plant, where twelve bodies can be received. large post-mortem room with two post-mortem tables, and all th latest equipment for ventilation and cleanliness. The walls ar of highly polished terrazzo, and the floor is made of imperviou material. Special attention has been paid to the viewing roor for those who have to view the body of a deceased relative c friend for purposes of identification. The viewing room is separate from a small chapel by means of a plate-glass window, acros which a blue velvet curtain is drawn. The chapel itself is furnishe with an altar, and the decoration is such that it fulfils all that i required, having regard to the various religions and creeds whos members may be brought there. Thus, persons who are oblige to identify the body of a deceased relative or friend will, withou doubt, leave the building with a feeling that everything has bee done to deal with an unpleasant matter in a most reverend an sacred manner.

The Council can well be proud of the building which the have constructed, as it is safe to say that it is the most moder and up-to-date Mortuary in the country.

The old Mortuary in the town walls was a cold and gruesom place, and those who have served on Coroners' Juries in the pas will realise the absolute necessity which prompted the Council t erect the Mortuary.

SANITARY CIRCUMSTANCES OF THE DISTRICT.

The following particulars have kindly been supplied by the Waterworks Engineer :—

Southampton Corporation Waterworks.

The statutory limits of supply of the Corporation's Water Undertaking embrace an area of about 225 square miles, including the Borough of Southampton.

The whole of the water supply is obtained from deep wells and adits in the chalk at Otterbourne, Twyford and Timsbury, where the Pumping Stations of the Undertaking are situated. The water obtained from the three sources of supply is of a natural hardness of about 16° (Clark's Scale) and in each case is softened down to about 8° before distribution. The water supplied to the consumers is submitted to frequent and regular examination, and is of a high degree of purity.

The average daily consumption throughout the area of supply during the year ended March 31st, 1936, was 9,022,000 gallons. The estimated daily consumption per head of population supplied during the same period was 29.66 gallons, of which 19.60 gallons were used for domestic purposes.

Rivers and Streams.

The Rivers Itchen and Test on either side of the old Borough are large tidal rivers. The tidal water of the Itchen receives the effluents from the sewage disposal works of the Southampton Corporation, and sewage effluent from the Eastleigh Urban District.

Sewage Disposal and Closet Accommodation.

The Borough Engineer has kindly given the following revised account of the drainage scheme of the Borough.

The whole of the area administered by the Corporation is sewered, with the exception of a few isolated groups of dwellings near the Borough boundary, in the Bitterne area, at Weston and Shirley, but in each case, however, schemes are on foot or actually in hand for the provision of the necessary additional sewers.

In the case of the former, there are 250 cesspits which are cleared by the Council's men, and at Weston there are 22 night soil buckets with which the men similarly deal.

The sewage is treated at three disposal works, situate at Chapel Wharf, Woolston and Portswood, and are all on the River Itchen.

At Chapel Wharf the disposal works have now been wholly reconstructed, the sewage being purified by continuous flow settlement, the tanks being emptied and "sludged" as necessary, the sludge being lifted by an ejector to an elevated tank on the Quay side, discharged into barges, taken out to sea and emptied off the Nab, in an Admiralty scheduled " spoil area."

The effluent from the tanks discharges into the tidal portion of the river, where there is sufficient dilution for purification purposes.

The sewage at the Woolston Works, after passing through detritus tanks, is treated by continuous flow settlement, the effluent passing into the River Itchen, where it is adequately diluted, and the sludge is ejected to a storage tank, and from thence barged out to sea.

The Portswood Works are situated in a much narrower part of the River Itchen, and most thorough purification is arranged, recent analyses having shown only 0.56 parts per 100,000 for solids in suspension on discharge.

The works are in two parts, a pumped system which brings in the sewage from the low-lying St. Denys area, in addition to the flow from Bassett, Swaythling, and Bitterne Park, and a gravitational system which deals with the area to the west and north-west of the Works.

The treatment in both cases being by means of mechanically operated screen detritus chambers, continuous flow settlement tanks, rotary filters and humus tanks, the effluent then discharging into the River Itchen, the sludge being pumped into a storage tank and then barged out to sea.

In each of the Works, adequate storm water tank accommodation is provided.

The average daily dry weather flow treated at each of the Works is :—

Chapel Wharf (estimated)	...	3,500,000	gallons per day.
Woolston (measured)	...	615,000	,, ,,
Portswood—			
Pumped System (measured)	...	1,188,000	,, ,,
Gravitational System (estimated)	...	430,000	,, ,,

The Shirley Drainage Scheme, for dealing with the sewage from the western half of the Borough, is now well in hand.

Main trunk sewers have been laid to the four main tapping points on the existing system at Coxford, Grove Road, Bourne Road, and Hill Lane, and these will be the means of directing the flow from the treatment works at Chapel, and conducting it to new sewage disposal works at Millbrook Point, where work on the pump houses, jetty, tanks and outfalls is well in hand and completion during the present financial year anticipated.

The expenditure on trunk sewers will be £125,000, and on the sewage disposal works £130,000.

Scavenging.

The scavenging of the Borough is carried out under the supervision of the Borough Engineer's Department.

VITAL STATISTICS.

Births, Deaths and Infantile Mortality.

BIRTHS.

The total number of births occurring among residents of the Borough was 2,696, compared with 2,769 in the previous year. The actual number of births registered in the Borough was 2,764, of which 122 were non-residents, and 54 births occurred in other districts among residents of Southampton. The birth-rate was 15.26, which is a decrease of 0.44 compared with the previous year, and is the lowest rate yet recorded in the Borough.

The birth-rate in 1934 was 15.70, as compared with an average of 17.6 for the last ten years.

The excess of births over deaths was 676, compared with 655 in 1934 and 723 in 1933.

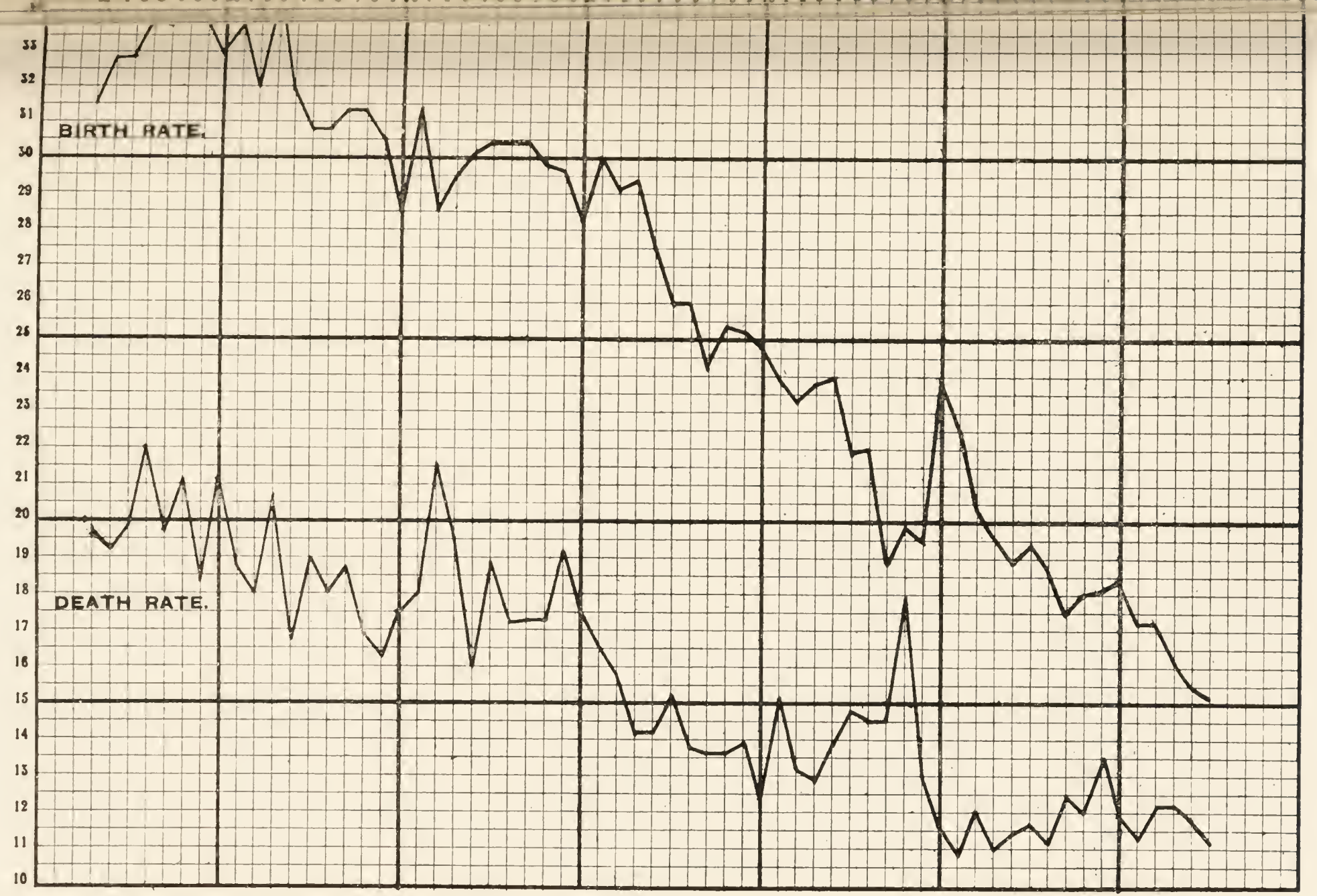
The following were the birth-rates in the Municipal Wards during the year :—

Bitterne & Pear Tree	19.4	St. Denys	14.2
Bitterne & Sholing	19.4	St. Mary's	13.6
Northam	19.0	Bevois	13.3
Shirley	17.9	Portswood	11.9
St. Nicholas ...	17.2	Freemantle ...	11.5
Trinity	17.1	Newtown	10.3
Woolston	16.8	All Saints	10.1
Millbrook	14.8	Banister	9.4
Town	14.2		

Of the total of 2,696 births, 1,381 were males and 1,31 females, being in the proportion of 1,058 males to every 1,00 females ; the average for the previous five years being 1,04 males to every 1,000 females.

The number of illegitimate births recorded was 125, th proportion to every 1,000 births registered being 46, and com pares with an average of 46 in the preceding five years.

The birth-rate in England and Wales was 14.7, and for th 121 Great Towns, 14.8.



BIRTH & DEATH RATES, PER 1000 OF THE POPULATION IN SOUTHAMPTON SINCE 1873

The Notification of Births Act came into operation in the Borough on the 9th March, 1908. This Act requires any person in attendance upon the mother within six hours after the time of birth, to notify the Medical Officer of Health of such birth in writing within thirty-six hours of the birth having occurred.

The number of notifications received during the year under the Act was 2,663, including 96 relating to still births.

The number of births registered during the same period was 2,764.

The number of notifications of births received, including still births, and percentages under the Notification of Births Act during the last five years are shown in the following table:—

Notified by—	1931.	1932.	1933.	1934.	1935.
Doctors and Parents ...	742	758	749	724	524
Midwives	2,349	2,360	2,214	2,064	2,043
	3,091	3,118	2,963	2,788	2,567
Percentage of live births notified	98.2	98.9	98.0	95.1	92.9

DEATHS.

The death-rate of the County Borough for the year was 11.44 per 1,000 of the population, being a decrease of 0.54 compared with the previous year. The average death-rate for the previous ten years was 12.0.

The total deaths registered in the Borough amounted to 2,023, of which 136 were non-residents. One hundred and thirty-three deaths of residents of the Borough occurred in other districts in England and Wales. The total deaths of residents of the Borough was therefore 2,020, of which 1,103 were males and 917 females.

The decrease in the number of deaths compared with the previous year was 94. The deaths from Influenza and Respiratory Diseases again show a decrease, but deaths from Heart Diseases continue to increase.

The death-rate in each of the Municipal Wards per 1,000 of the population was :—

St. Nicholas ...	7.2	Northam	12.5
Shirley	9.0	St. Denys	12.6
Bitterne & Pear Tree	9.1	Trinity	12.6
Bitterne & Sholing	9.7	Freemantle ...	12.8
Banister	10.5	Newtown	13.4
Woolston	10.6	St. Mary's	13.7
Millbrook	11.2	Bevois	15.5
Portswood	12.2	Town	16.3
All Saints	12.5		

Of the 2,023 deaths registered in the Borough, 905, equal to 44.7 per cent., occurred in Public Institutions and Nursing Homes, compared with 44.2 per cent. in 1934 and 45.0 in 1933.

The Institutions in which the deaths occurred were :— Isolation Hospital 40, Borough Hospital 441, St. Mary's Institution 48, Royal South Hants and Southampton Hospital 263, Southampton Children's Hospital 40, Municipal Maternity Home, 10, Nursing Homes, 63.

TABLE 1.

Showing Population, Birth Rates, Infantile Mortality and Death Rates in each of the Municipal Wards for the Year 1935, together with the Average Rates for the previous 10 Years 1925—1934.

Ward.	Estimated Population, 1934.	1935.					Average Rates, Ten Years, 1925-1934.				
		Birth Rate.	Infantile Mortality per 1,000 Births Regist'red	Death Rate from Zymotic Diseases. †	Death Rate from Pulm'ary Tuber-culosis.	Death Rate from All Causes.	Birth Rate.	Infantile Mortality per 1,000 Births Register'd	Death Rate from Zymotic Diseases. †	Death Rate from Pulm'ary Tuber-culosis.	Death Rate from All Causes.
1. Town ...	9,500	14.2	66.6	0.95	1.26	16.3	17.8	80.9	0.74	2.07	17.5
2. St. Mary's ...	9,897	13.6	44.7	0.40	0.61	13.7	16.3	73.2	0.43	1.08	11.9
3. Northam ...	9,223	19.0	51.5	0.43	0.54	12.5	20.0	59.1	0.57	1.29	12.8
4. Trinity ...	7,695	17.1	38.2	0.26	1.17	12.6	19.3	63.2	0.48	1.12	14.1
5. Newtown ...	7,797	10.3	37.5	0.00	0.38	13.4	14.4	43.9	0.20	0.86	12.1
6. All Saints ...	7,835	10.1	63.3	0.13	1.02	12.5	12.3	47.8	0.36	0.81	12.5
7. Bevois ...	7,303	13.3	21.6	0.41	1.37	15.5	13.4	48.4	0.28	0.97	13.9
8. Banister ...	8,848	9.4	72.3	0.11	0.45	10.5	10.7	41.4	0.13	0.63	11.0
9. Freemantle ...	7,041	11.5	37.0	0.14	0.99	12.8	13.2	55.9	0.24	1.04	12.6
10. Millbrook ...	13,633	14.8	64.6	0.29	1.17	11.2	19.0	50.5	0.38	0.93	10.7
11. Shirley ...	18,544	17.9	38.3	0.49	0.65	9.0	19.9	57.9	0.38	0.85	11.9
12. Portswood ...	11,679	11.9	36.3	0.51	0.60	12.2	14.9	44.7	0.25	0.71	11.1
13. St. Denys ...	9,779	14.2	57.9	0.51	0.82	12.6	16.3	40.3	0.23	0.92	11.0
14. Bitterne and Pear Tree ...	11,728	19.4	44.0	0.34	0.77	9.1	20.8	50.6	0.32	1.02	9.7
15. Bitterne and Sholing ...	13,852	19.4	22.4	0.00	1.01	9.7	21.7	50.3	0.30	0.92	10.4
16. Woolston ...	7,846	16.8	45.5	0.25	0.89	10.6	16.2	56.1	0.18	0.91	11.1
17. St. Nicholas...	15,000	17.2	58.1	0.40	0.73	7.2	30.0	56.4	0.66	1.04	14.4
Borough ...	177,200	15.2	46.0	0.34	0.84	11.44	17.6	55.7	0.36	1.01	12.0

† Includes deaths from Small Pox, Enteric Fever, Scarlet Fever, Diphtheria, Measles, Whooping Cough, and Diarrhœa and Enteritis under two years of age.

TABLE 2.

TABLE SHOWING DEATHS OF PERSONS BELONGING TO SOUTHAMPTON, CLASSIFIED ACCORDING TO AGES AND SEX FOR 10 YEARS.

Year	AGES.													SEX.		Total
	0 to 1	1 to 2	2 to 5	5 to 15	15 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 to 75	75 to 85	85 to 95	95 & Upwards	Males	Females	
1926	175	31	36	62	72	87	126	214	288	363	318	100	7	972	908	1880
1927	186	62	67	66	74	95	144	242	325	424	405	89	6	1148	1035	2183
1928	152	23	30	48	96	86	138	243	323	419	354	108	5	1085	940	2025
1929	198	36	46	53	100	98	131	265	378	458	419	127	6	1255	1090	2315
1930	184	44	50	68	87	109	137	235	339	411	349	92	5	1116	994	2110
1931	144	29	19	34	77	88	104	225	304	438	394	121	4	1052	929	1981
1932	161	40	34	39	72	97	116	238	375	439	388	128	9	1120	1016	2136
1933	165	27	20	52	71	92	111	230	354	465	413	129	2	1098	1033	2131
1934	146	16	26	50	63	108	124	216	386	460	391	117	5	1118	996	2114
1935	124	17	38	46	66	89	91	211	341	495	388	108	6	1102	918	2020

TABLE 3.

CAUSES OF DEATHS IN SOUTHAMPTON FOR 10 YEARS, 1926 TO 1935.

CAUSE OF DEATH.	1926	1927	1928	1929	1930	1931	1932	1933	1934	1935
Enteric Fever	4	2	6	3	2	...	...	...	1	1
Small Pox	...	...	...	...	...	...	...	...	...	...
Measles	3	54	3	1	43	1	14	6	9	3
Scarlet Fever	...	10	2	3	2	1	...	1	1	2
Whooping Cough	8	12	10	29	4	14	13	7	15	6
Diphtheria	20	10	19	23	30	12	2	9	21	36
Influenza	53	66	39	93	8	43	56	50	14	14
Erysipelas	7	9	12	5	6	1	7	1	7	2
Phthisis (Pulmonary Tuberculosis)	160	171	178	200	197	154	187	159	173	148
Tuberculous Meningitis	13	18	11	25	16	7	14	12	10	4
Other Tuberculous Diseases ...	10	6	14	14	10	9	11	14	7	9
Cancer, malignant disease ...	237	275	281	289	286	251	305	284	284	299
Rheumatic Fever	5	9	10	9	10	10	8	8	7	7
Meningitis	9	9	5	9	5	2	8	5	5	4
Organic Heart Disease	257	259	311	288	314	369	350	399	417	436
Bronchitis	115	161	152	214	124	146	117	106	96	60
Pneumonia (all forms)	134	213	164	180	124	186	197	172	138	117
Other Diseases of Respiratory Organs	8	17	12	10	17	15	10	11	14	8
Diarrhœa and Enteritis	23	30	16	25	20	14	18	8	8	13
Appendicitis	16	11	19	15	14	14	13	12	11	11
Cirrhosis of Liver	7	5	10	7	7	5	8	6	8	7
Alcoholism	1	1	1	1	2	2	...	3	...	...
Nephritis and Bright's Disease ...	62	102	99	107	128	104	77	102	116	99
Puerperal Fever	2	4	5	6	11	4	3	3	5	4
Other accidents and Diseases of Pregnancy and Parturition ...	9	8	7	8	4	1	9	8	9	12
Congenital Debility and Malformation, including Premature Birth	79	85	68	82	85	60	75	79	70	60
Violent Deaths, excluding Suicide	50	65	66	57	75	59	64	61	70	66
Suicide	24	24	21	25	39	30	30	25	35	35
Other Diseases	564	547	484	587	527	467	540	580	563	557
Totals	1880	2183	2025	2315	2110	1981	2136	2131	2114	2020

TABLE 4.

TABLE SHOWING DEATHS FROM ALL CAUSES BELONGING TO THE COUNTY BOROUGH OF SOUTHAMPTON DURING THE YEAR 1935 (52 weeks ended 31st December, 1935), CLASSIFIED ACCORDING TO DISEASES AND AGES. (This Table includes deaths of "Residents" occurring in other districts, and excludes deaths of "Non-Residents," in accordance with the Rules of the Registrar-General).

DISEASES CLASSIFIED.	AGES.													SEX.		Totals.
	0 to 1	1 to 2	2 to 5	5 to 15	15 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 to 75	75 to 85	85 to 95	95 and up-w'ds	Males.	Females.	
I.—Infectious and Parasitic Diseases.																
Enteric Fever	...	...	...	...	...	...	...	...	1	...	...	...	...	...	1	1
Measles	...	...	...	...	...	...	...	...	...	...	...	...	...	1	2	3
Scarlet Fever	1	...	2	...	...	...	...	...	...	...	...	...	...	2	...	2
Whooping Cough	...	...	1	...	1	...	...	...	...	...	...	...	...	4	2	6
Diphtheria	2	1	1	1	1	...	...	...	...	...	...	...	...	18	18	36
Influenza	...	4	12	20	...	...	...	...	...	...	...	...	...	8	6	14
Dysentery	...	...	1	...	...	1	...	4	2	1	4	1	...	...	1	1
Erysipelas	...	...	...	...	...	...	1	...	...	...	...	...	...	...	2	2
Encephalitis Lethargica	...	...	...	...	...	...	...	...	1	...	1	...	...	...	2	2
Cerebro-Spinal Meningitis	...	...	...	...	1	...	...	...	...	1	...	...	...	2	...	2
Tetanus	...	...	...	1	...	1	...	...	1	...	...	...	...	2	1	3
Pulmonary Tuberculosis	...	...	...	...	...	...	1	...	...	...	...	...	...	1	...	1
Tuberculous Meningitis	...	...	1	2	38	32	23	21	22	9	...	...	...	95	53	148
Tuberculosis of Peritoneum & Intestines	...	...	...	...	1	1	...	...	...	...	...	...	...	4	1	5
Tuberculosis of Spine	...	...	...	...	1	2	...	...	...	...	...	...	...	1	2	3
Tuberculosis of Kidney	...	...	...	...	1	2	...	...	...	1	...	...	...	1	3	4
Syphilis (congenital)	...	...	...	...	...	...	...	...	1	...	...	...	...	1	...	1
Syphilis (acquired)	2	...	...	...	...	...	...	...	...	...	...	...	...	...	2	2
Phagedænic Toxæmia	...	...	...	...	...	...	3	3	1	2	...	...	...	7	2	9
Septicæmia	...	...	...	...	...	...	...	...	1	...	...	...	...	1	...	1
Malaria	...	...	...	...	...	...	1	...	2	...	...	...	...	1	2	3
Mycosis Fungoides	...	...	...	...	...	...	...	1	...	1	...	...	...	1	1	2
	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
Totals	5	5	19	26	44	39	29	30	32	15	5	1	...	151	99	250
II.—Cancer and other Tumours.																
Cancer of the Buccal Cavity	...	...	...	...	...	...	...	2	7	8	1	1	...	18	1	19
Cancer of the Digestive Organs	...	...	...	...	...	2	3	16	35	63	38	9	...	96	70	166
Cancer of the Respiratory Organs	...	...	...	...	...	...	1	4	7	5	...	...	...	14	3	17

TABLE 4.—Continued.

DISEASES CLASSIFIED.	AGES.													SEX.		Totals.
	0 to 1	1 to 2	2 to 5	5 to 15	15 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 to 75	75 to 85	85 to 95	95 and up-w'ds	Males.	Females.	
II.—Cancer and other Tumours—contd.																
Cancer of the Uterus	...	...	...	...	...	...	3	6	8	2	3	1	...	...	23	23
Cancer of the other Female Genital Organs	...	...	...	...	1	...	...	...	2	2	...	...	...	...	5	5
Cancer of the Breast	...	...	...	...	...	...	4	8	6	7	4	2	...	...	31	31
Cancer of the Male Genito-Urinary Organs	...	...	...	...	...	1	1	1	6	7	3	...	...	19	...	19
Cancer of the Skin	...	...	...	...	...	...	...	...	1	1	1	...	...	2	1	3
Cancer of the other Organs	...	...	1	...	...	...	1	5	3	3	2	1	...	8	8	16
Cerebral Tumour	...	1	1	...	...	1	...	...	2	...	...	...	...	4	1	5
Tumour of Ovary	...	...	...	...	...	...	...	...	...	1	1	...	...	...	2	2
Tumour of Pituitary Gland	...	...	1	...	...	1	...	...	...	...	...	...	...	...	2	2
Totals	...	1	3	...	1	5	13	42	77	99	53	14	...	161	147	308
III.—Rheumatism, and Diseases of Nutrition and of Endocrine Glands, and other General Diseases.																
Rheumatic Fever	...	...	...	3	...	...	1	2	1	...	...	...	...	2	5	7
Rheumatoid Arthritis	...	...	...	...	...	...	...	...	3	4	1	...	...	4	4	8
Diabetes	...	...	...	...	...	2	...	4	7	15	5	...	...	14	19	33
Exophthalmic Goitre	...	...	...	1	...	...	1	...	3	...	...	...	...	...	5	5
Totals	...	...	...	4	...	2	2	6	14	19	6	...	...	20	33	53
IV.—Diseases of the Blood and Blood-forming Organs.																
Purpura Hæmorrhagica	...	...	...	...	...	...	...	...	1	...	...	...	...	1	...	1
Anæmia	...	...	...	...	...	1	...	1	1	2	1	...	...	3	3	6
Leukæmia	...	...	...	...	1	...	...	1	1	...	...	...	...	1	2	3
Lymphadenoma	...	...	...	...	...	1	...	1	...	...	...	...	...	1	1	2
Erythræmia	...	...	...	...	...	1	...	...	...	...	...	...	...	...	1	1
Totals	...	...	...	...	1	3	...	3	3	2	1	...	...	6	7	13

TABLE 4.—Continued.

DISEASES CLASSIFIED.	AGES.													SEX.		Totals.
	0 to 1	1 to 2	2 to 5	5 to 15	15 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 to 75	75 to 85	85 to 95	95 and up-w'ds	Males.	Females.	
V.—Chronic Poisoning.																
Alcoholism	...	...	...	...	...	...	...	1	...	...	...	...	...	1	...	1
VI.—Diseases of the Nervous System and Sense Organs.																
Cerebral Abscess	...	...	...	...	1	...	...	...	...	...	...	...	...	1	...	1
Meningitis	2	...	...	2	...	...	...	...	...	...	...	...	...	2	2	4
Locomotor Ataxy	...	...	...	...	...	...	...	1	2	2	1	...	...	6	...	6
Progressive Muscular Atrophy	...	...	...	...	...	...	...	...	2	...	1	...	...	1	2	3
Myelitis	...	...	...	...	1	...	2	...	1	...	...	...	...	1	3	4
Syringomyelia	...	...	...	...	...	...	...	1	...	...	...	...	...	...	1	1
Cerebral Hæmorrhage	...	...	...	...	...	...	...	7	11	19	15	2	1	29	26	55
Cerebral Thrombosis	...	...	...	...	...	...	...	1	4	7	7	3	...	12	10	22
Cerebral Embolism	...	...	...	...	...	...	...	...	...	3	...	...	...	1	2	3
Cerebral Softening	...	...	...	...	...	...	...	...	1	...	...	...	...	1	...	1
Paraplegia	...	...	...	...	...	...	...	1	...	...	...	...	...	...	1	1
General Paralysis of the Insane	...	...	...	...	...	...	...	1	...	...	...	...	...	1	...	1
Melancholia	...	...	...	...	1	...	...	2	2	...	...	...	...	3	2	5
Epilepsy	...	...	...	...	...	1	...	...	...	1	...	...	...	1	1	2
Convulsions	2	...	1	...	...	...	...	...	...	...	...	...	...	2	1	3
Paralysis Agitans	...	...	...	...	...	...	...	...	...	3	1	...	...	1	3	4
Spastic Diplegia	...	...	...	...	...	...	...	...	1	...	...	...	...	1	...	1
Disseminated Sclerosis	...	...	...	...	...	1	1	4	2	2	...	...	...	4	6	10
Mental Deficiency	...	...	...	...	1	...	...	...	...	...	...	...	...	...	1	1
Senile Dementia	...	...	...	...	...	...	...	...	1	2	3	2	1	3	6	9
Otitis Media	1	...	...	...	...	...	...	...	...	...	1	...	...	...	2	2
Mastoiditis	...	...	...	1	...	...	...	...	...	1	...	...	...	1	1	2
Totals	5	...	1	3	4	2	3	18	27	40	29	7	2	71	70	141

TABLE 4.—Continued.

DISEASES CLASSIFIED.	AGES.													SEX.		Totals.
	0 to 1	1 to 2	2 to 5	5 to 15	15 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 to 75	75 to 85	85 to 95	95 and up-w'ds	Males.	Females.	
VII.—Diseases of the Circulatory System.																
Pericarditis...	...	...	...	...	2	...	...	...	...	...	...	...	...	2	...	2
Acute Endocarditis	...	...	...	...	...	1	...	...	...	...	...	...	...	1	...	1
Malignant Endocarditis	...	...	...	...	1	...	1	...	...	...	...	...	...	2	...	2
Acute Myocarditis...	...	...	...	...	...	...	1	...	...	1	3	...	...	1	4	5
Aortic Valvular Disease of Heart ...	...	...	...	...	...	...	...	3	3	5	3	...	...	11	3	14
Mitral Valvular Disease of Heart ...	...	...	...	...	...	1	2	1	4	9	4	1	...	6	16	22
Fatty Heart	...	...	...	...	...	...	1	2	9	10	2	4	...	13	15	28
Other or Unspecified Organic Disease of the Heart	...	...	...	...	...	...	10	20	57	119	133	31	2	196	176	372
Angina Pectoris	...	...	...	...	...	...	...	8	12	8	3	...	...	23	8	31
Thrombosis	...	...	...	...	...	...	...	...	1	...	3	1	...	1	4	5
Aneurysm	...	...	...	...	...	2	...	4	1	2	...	...	...	4	5	9
Arterio Sclerosis	...	...	...	...	...	...	...	5	12	35	36	13	...	57	44	101
Cardiac Embolism	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1	1
Gangrene (Other)	...	...	...	...	...	...	...	...	...	3	1	...	...	1	3	4
Varicose Veins	...	...	...	...	...	...	...	...	...	2	...	...	...	1	1	2
Totals	...	...	...	...	3	4	15	43	99	194	189	50	2	319	280	599
VIII.—Diseases of the Respiratory System.																
Laryngitis	...	...	...	1	...	...	...	...	...	...	...	...	...	1	...	1
Bronchitis	3	2	1	...	...	...	...	5	8	13	21	7	...	26	34	60
Broncho-Pneumonia	10	3	5	1	...	1	3	1	16	19	13	4	...	38	38	76
Lobar Pneumonia	...	2	3	1	1	...	4	10	5	12	3	...	...	32	9	41
Pleurisy	...	...	...	...	...	...	...	...	1	1	...	...	...	2	...	2
Asthma	...	...	...	...	...	...	...	2	...	...	1	...	...	3	...	3
Abscess of Lung	...	...	...	...	1	...	...	1	...	...	...	...	...	2	...	2
Totals	13	7	9	3	2	1	7	19	30	45	38	11	...	104	81	185

DISEASES CLASSIFIED.	AGES.													SEX.		Totals.
	0 to 1	1 to 2	2 to 5	5 to 15	15 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 to 75	75 to 85	85 to 95	95 and up-w'ds	Males.	Females.	
IX.— Diseases of the Digestive System.																
Pyorrhœa	...	...	...	...	...	...	...	1	...	...	...	...	...	1	...	1
Frontal Sinusitis	...	...	...	...	...	...	1	...	...	...	...	...	...	...	1	1
Agranulocytic Angina	...	...	...	...	...	...	...	1	...	...	...	...	...	...	1	1
Pharyngitis	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
Tonsillitis	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
Ulcer of Stomach	...	...	...	...	...	3	1	...	1	...	...	...	...	3	3	6
Ulcer of Duodenum	...	...	...	...	...	...	3	6	5	3	2	...	...	17	2	19
Gastritis	...	...	...	...	...	...	...	3	...	...	...	...	...	2	1	3
Colitis	...	...	...	...	...	...	...	...	...	...	1	...	...	1	...	1
Diarrhœa (under two years)	...	...	...	...	...	1	...	1	1	...	...	...	...	2	1	3
Diarrhœa (over two years)	...	...	...	...	...	...	...	...	...	...	...	...	...	8	4	12
Appendicitis	...	...	...	...	...	...	...	1	...	...	...	...	...	...	1	1
Hernia	...	...	...	...	...	...	4	3	...	2	1	...	...	4	7	11
Intestinal Obstruction	...	...	...	...	...	...	...	1	3	...	2	...	...	2	4	6
Intussusception	...	...	...	...	...	...	...	...	1	4	1	...	...	6	...	6
Cirrhosis of Liver	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
Jaundice	...	...	...	1	...	...	...	2	3	1	...	...	...	7	...	7
Abscess of Liver	...	...	...	...	...	...	...	...	...	1	1	...	...	1	1	2
Biliary Calculi	...	...	...	...	...	1	...	...	...	...	...	...	...	1	...	1
Cholecystitis	...	...	...	...	...	...	...	...	3	2	...	...	...	1	4	5
Ruptured Gall Bladder	...	...	...	...	...	...	1	...	...	2	...	...	...	...	3	3
Pancreatitis	...	...	...	...	...	1	...	...	...	...	...	...	...	1	...	1
Peritonitis	...	...	...	...	...	...	...	...	1	1	...	...	...	1	1	2
	...	...	...	1	...	...	...	...	...	...	...	...	...	...	1	1
Totals	...	...	12	1	3	2	...	6	10	19	18	16	8	...	...	59	36	95
X.—Non-Venereal Diseases of the Genito-Urinary System.																
Acute Nephritis	...	...	...	...	...	...	...	1	...	...	...	...	...	1	...	1
Chronic Nephritis	...	...	...	1	...	1	5	12	19	32	21	7	...	50	48	98
Pyelitis	...	...	...	...	...	...	...	...	...	1	...	1	...	1	1	2

TABLE 4.—Continued.

DISEASES CLASSIFIED.	AGES.													SEX.		Totals.
	0 to 1	1 to 2	2 to 5	5 to 15	15 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 to 75	75 to 85	85 to 95	95 and up-w'ds	Males.	Females.	
X.—Non-Venereal Diseases of the Genito-Urinary System—contd.																
Renal Calculi	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1	1
Cystitis	...	...	...	...	...	...	...	...	...	...	1	...	...	1	...	1
Vesico-Vaginal Fistula	...	...	...	...	...	...	...	1	...	...	...	...	...	...	1	1
Stricture of Urethra	...	...	...	...	...	...	...	...	2	...	...	...	...	2	...	2
Enlarged Prostate	...	...	...	...	...	...	...	...	1	4	6	...	...	11	...	11
Prostatic Obstruction	...	...	...	...	...	...	...	1	...	...	...	...	...	1	...	1
Uterine Hæmorrhage	...	...	...	...	1	...	...	...	...	1	...	...	...	...	2	2
Salpingitis	...	...	...	...	...	...	1	...	...	...	...	...	...	...	1	1
Totals	...	...	...	1	1	1	6	15	22	38	29	8	...	67	54	121
XI.—Diseases of Pregnancy, Childbirth, and the Puerperal State.																
Abortion	...	...	...	...	...	1	...	...	...	...	...	...	...	...	1	1
Ectopic Gestation	...	...	...	...	...	1	...	...	...	...	...	...	...	...	1	1
Post-Partum Hæmorrhage	...	...	...	...	1	1	...	...	...	...	...	...	...	...	2	2
Puerperal Sepsis	...	...	...	...	...	4	...	...	...	...	...	...	...	...	4	4
Eclampsia	...	...	...	...	1	4	1	...	...	...	...	...	...	...	6	6
Toxæmia of Pregnancy	...	...	...	...	...	1	...	...	...	...	...	...	...	...	1	1
Protracted Labour	...	...	...	...	...	1	...	...	...	...	...	...	...	...	1	1
Totals	...	...	...	...	2	13	1	...	...	...	...	...	...	...	16	16
XII.—Diseases of the Skin.																
Carbuncle	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1	1
Cellulitis	...	...	...	...	...	...	...	1	1	...	...	...	...	1	1	2
Ulceration of Leg	...	...	...	...	...	...	...	...	...	...	1	...	...	1	...	1
														2	2	4

DISEASES CLASSIFIED.	AGES.													SEX.		Totals.
	0 to 1	1 to 2	2 to 5	5 to 15	15 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 to 75	75 to 85	85 to 95	95 and up-w'ds	Males.	Females.	
XIII.—Diseases of the Bones and Organs of Locomotion.																
Osteomyelitis	...	...	...	1	...	...	...	...	1	...	...	...	...	2	...	2
Acute Arthritis	...	...	...	...	1	...	...	...	...	2	...	...	...	2	1	3
Paget's Disease of Bones	...	...	...	...	...	...	...	...	...	1	...	...	...	...	1	1
Septic Arthritis	1	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
Totals	1	...	...	1	1	...	...	...	1	3	...	...	...	4	3	7
XIV.—Congenital Malformations.																
Congenital Hydrocephalus	1	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
Spina bifida	5	...	...	...	...	...	...	...	...	...	...	...	...	4	1	5
Malformation of the Heart	1	...	1	...	...	...	...	...	...	...	...	...	...	1	1	2
Pyloric Stenosis	3	...	...	...	...	...	...	...	...	...	...	...	...	3	...	3
Stenosis of Bile Duct	1	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
Cleft Palate	...	1	...	...	...	...	...	...	...	...	...	...	...	1	...	1
Atresia of Intestine	1	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
Imperforated Anus	1	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
Totals	13	1	1	...	...	...	...	...	...	...	...	...	...	12	3	15
XV.—Diseases of Early Infancy.																
Debility, Marasmus and Inanition ...	7	1	...	...	...	...	...	...	...	...	...	...	...	3	5	8
Premature Birth	45	...	...	...	...	...	...	...	...	...	...	...	...	28	17	45
Injury at Birth	9	...	...	...	...	...	...	...	...	...	...	...	...	5	4	9
Atelectasis	4	...	...	...	...	...	...	...	...	...	...	...	...	1	3	4
Icterus Neonatorum	1	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
Hæmorrhage of New Born	4	...	...	...	...	...	...	...	...	...	...	...	...	2	2	4
Totals	70	1	...	...	...	...	...	...	...	...	...	...	...	40	31	71

TABLE 4.—Continued.

DISEASES CLASSIFIED.	AGES.													SEX.		Totals.
	0 to 1	1 to 2	2 to 5	5 to 15	15 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 to 75	75 to 85	85 to 95	95 and up-w'ds	Males.	Females.	
XVI.—Old Age.																
Senile Decay	...	...	...	...	...	...	...	...	...	4	18	16	2	16	24	40
XVII.—Deaths from Violence.																
(*a*) Suicide—																
By Solid or Liquid Poisons ...	...	...	...	...	...	1	...	2	...	...	...	...	...	1	2	3
By Poisonous Gas	...	...	...	...	...	3	1	5	3	4	...	...	...	11	5	16
By Hanging	...	...	...	...	1	...	...	2	1	1	...	...	...	5	...	5
By Drowning	...	...	...	...	...	...	...	...	2	...	...	...	...	1	1	2
By Firearms	...	...	...	...	...	1	...	...	...	...	...	...	...	1	...	1
By Cutting	...	...	...	...	...	1	2	...	...	1	2	...	...	6	...	6
By Railway	...	...	...	...	...	2	...	...	...	...	...	...	...	2	...	2
(*b*) Accidents—																
By Food Poisoning	...	...	...	...	...	...	...	1	...	...	...	...	...	1	...	1
By Poisoning by Gas	...	...	...	...	...	...	...	...	1	...	...	...	...	1	...	1
By Solid or Liquid Poisons ...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	1	1
By Burns or Scalds	1	1	...	...	...	...	...	1	...	2	1	...	...	3	3	6
By Suffocation	2	...	...	2	...	1	...	...	1	...	...	...	...	4	2	6
By Drowning	1	...	...	...	1	...	...	...	1	...	...	...	...	1	2	3
By Injury by Fall...	1	...	...	1	...	2	2	1	2	6	4	1	...	14	6	20
By Injury in Vehicular Traffic ...	...	...	...	3	5	2	...	2	6	6	3	...	...	17	10	27
(*c*) Homicide																
Murder	...	...	1	...	...	...	...	...	...	...	...	...	...	1	...	1
Totals	5	1	2	6	7	13	5	14	17	20	10	1	...	69	32	101
Total Deaths from all Causes	124	17	38	46	66	80	91	211	341	495	388	108	6	1102	918	2020

Causes of Death.	Municipal Ward.																		Total.
	Town.	St. Mary's.	Northam.	Trinity.	Newtown.	All Saints.	Bevois.	Banister.	Freemantle.	Millbrook.	Shirley.	Portswood.	St. Denys.	Bitterne and Pear Tree.	Bitterne and Sholing.	Woolston.	St. Nicholas.	No Home Address obtainable.	
Enteric Fever...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	1
Measles	2	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	3
Scarlet Fever...	1	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	2
Whooping Cough	...	...	1	...	...	...	...	...	...	1	...	2	...	...	...	1	1	...	6
Diphtheria	5	3	1	1	...	1	3	...	1	1	8	3	4	2	...	1	2	...	36
Influenza	...	...	1	...	1	2	2	...	2	...	1	...	1	1	3	...	...	...	14
Erysipelas	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	1	2
Tuberculosis (Pulmonary)	12	6	5	9	3	8	10	4	7	16	12	7	8	9	14	7	11	...	148
Tuberculous Meningitis	...	...	...	1	...	...	...	1	...	1	1	...	...	...	...	...	...	...	4
Other Tubercular Diseases	2	...	...	1	1	...	2	...	...	...	1	...	1	...	...	...	1	...	9
Cancer	17	20	12	20	11	16	22	16	15	26	20	25	18	18	15	10	15	3	299
Rheumatic Fever	...	1	...	...	2	...	...	1	...	2	...	...	...	1	...	...	...	...	7
Meningitis	1	...	...	...	...	...	...	...	...	2	1	...	...	...	...	...	...	...	4
Organic Heart Disease	42	29	35	23	26	20	19	19	17	28	42	30	22	15	29	18	22	...	436
Bronchitis	4	4	4	3	6	6	6	4	2	5	5	1	6	1	2	...	1	...	60
Pneumonia (all forms)	17	8	14	3	7	4	9	3	2	6	13	6	6	4	8	3	4	...	117
Other Diseases of the Respiratory System	1	1	1	...	...	...	...	...	...	1	1	...	1	...	1	1	...	...	8
Diarrhœa and Enteritis	1	1	1	1	...	...	...	1	...	2	1	1	1	...	...	...	3	...	13
Appendicitis	...	3	...	...	...	...	...	1	1	...	...	3	2	1	...	...	...	...	11
Cirrhosis of Liver	1	1	...	...	1	3	...	...	...	...	...	...	...	...	...	...	1	...	7
Nephritis and Bright's Disease	9	10	3	1	4	6	4	5	9	10	6	7	6	4	6	8	1	...	99
Puerperal Fever	...	1	...	...	...	...	...	...	1	...	...	...	...	1	1	...	...	...	4
Other Diseases and accidents of Pregnancy and Parturition	1	...	2	...	1	...	...	...	1	...	...	2	...	1	2	...	2	...	12
Congenital Defects and Malformations (including Premature Birth)	1	2	6	2	1	3	3	3	...	9	3	2	8	4	5	2	6	...	60
Violent Deaths (excluding Suicide) ...	7	4	4	4	3	3	3	4	4	3	6	3	3	3	6	...	6	...	66
Suicide	2	4	...	1	3	2	1	4	...	1	3	6	1	3	2	1	1	...	35
Other Diseases	28	36	30	26	33	23	28	26	28	39	41	45	33	36	40	31	30	4	557
Totals	154	134	121	96	103	97	112	92	90	153	165	143	122	106	134	83	107	8	2020

TABLE 6.

Showing Population, Birth Rates, Death Rates, Zymotic Death Rates, Infantile Mortality, and Marriage Rates in Southampton and England and Wales for Twenty Years, 1916—1935.

Year.	Population.	Births.			Deaths.			Zymotic Deaths.		Infantile Mortality. Deaths under 1 year per 1000 Births Registered.		Marriages.		
		Total Births.	Birth Rate.	Birth Rate England and Wales.	Total Deaths.	Death Rate.	Death Rate England and Wales.	Total Zymotic Deaths.	Zymotic Death Rate.	Southampton.	England & Wales.	Total Marriages.	Marriage Rate.	Marriage Rate England and Wales.
1916†	116,391	2,770	22.0	20.9	1,677	14.5	14.4	98	0.84	85	91	1052	16.6	14.9
1917†	115,345	2,413	18.8	17.8	1 661	14.5	14.4	93	0.81	86	96	946	14.7	13.8
1918†	114,727	2,533	19.8	17.7	2,049	17.9	17.6	137	1.23	92	97	1209	18.8	15.3
*1919†	126,033	2,598	19.5	18.5	1,663	13.0	13.8	56	0.44	74	89	1300	19.8	19.8
1920†	131,055	3,131	23.9	25.4	1,520	11.6	12.4	109	0.83	67	80	1375	21.0	20.2
1921	162,200	3,621	22.4	22.4	1,749	10.8	12.1	82	0.51	62	83	...	...	16.9
1922	163,700	3,318	20.3	20.6	1,975	12.1	12.9	83	0.51	67	77	...	...	15.7
1923	165,200	3,205	19.5	19.7	1,817	11.0	11.6	89	0.54	54	69	...	...	15.2
*1924	167,300	3,204	18.9	18.8	1,938	11.4	12.2	56	0.33	62	75	...	...	15.3
1925	168,600	3,250	19.3	18.3	1,956	11.6	12.2	60	0.36	57	75	1413	16.8	15.2
1926	169,300	3,141	18.6	17.8	1,880	11.1	11.6	52	0.31	56	70	1353	16.0	14.3
1927	169,800	2,958	17.5	16.7	2,183	12.9	12.3	115	0.68	63	69	1459	17.2	15.7
1928	169,900	3,047	18.0	16.7	2,025	12.0	11.7	52	0.32	50	65	1491	17.6	15.3
1929	172,300	3,111	18.1	16.3	2,315	13.5	13.4	82	0.48	64	74	1562	18.2	15.8
*1930	175,000	3,260	18.3	16.3	2,110	11.9	11.4	97	0.55	56	60	1583	18.1	15.8
1931	175,600	3,010	17.2	15.5	1,981	11.3	12.3	40	0.23	48	66	1562	17.8	15.6
1932	177,470	3,025	17.1	15.3	2,136	12.1	12.0	44	0.25	53	65	1395	15.7	15.2
1933	177,600	2,854	16.1	14.4	2,131	12.0	12.3	30	0.18	58	64	1481	16.7	15.7
1934	177,000	2,769	15.7	14.8	2,114	12.0	11.8	55	0.31	53	59	1453	16.4	16.9
1935	177,200	2,696	15.2	14.7	2,020	11.4	11.7	60	0.34	46	57	1605	18.1	17.1

*53 Weeks. † Estimated Civil Population.

Note.—The Zymotic Deaths and Death Rates include the seven principal Zymotic Diseases, viz.—Whooping Cough, Measles, Diarrhœa, Diphtheria, Scarlet Fever, Typhoid Fever and Small Pox.

INFANTILE MORTALITY.

The deaths of infants under one year of age recorded during the year numbered 124, which is a decrease of 22 deaths compared with the previous year.

The deaths are equal to a rate of 46.0 per 1,000 births registered during the same period. The average rate for the ten years, 1925–1934, was 55.7.

In the 121 Great Towns of England and Wales the infantile mortality rate for 1935 was 62.

The infantile mortality rate in Southampton during the past thirty-eight years is shown in the following table :—

Period.	Infantile Mortality Rate.
Average 5 years, 1897—1901	159
,, ,, 1902—1906	120
,, ,, 1907—1911	108
,, ,, 1912—1916	86
,, ,, 1917—1921	76
,, ,, 1922—1926	59
,, ,, 1927—1931	56
1932	53
1933	58
1934	53
1935	46

In the year 1935 the number of deaths of male infants amounted to 77, and the deaths of females 47. The rate per 1,000 births for each sex for the past five years is shown in the following table :—

	Males.	Females.	Both Sexes.
1931 ...	57.1 ...	38.1 ...	47.8
1932 ...	63.3 ...	43.3 ...	53.2
1933 ...	65.3 ...	49.9 ...	57.8
1934 ...	56.4 ...	50.0 ...	52.7
1935 ...	55.8 ...	35.7 ...	46.0

The deaths of illegitimate infants amounted to 15, which, calculated upon the number of illegitimate births registered during the same period, is equal to an infantile mortality of 120.0, as compared with a rate for legitimate infants of 42.4.

Similar rates for the past five years are given for comparison:

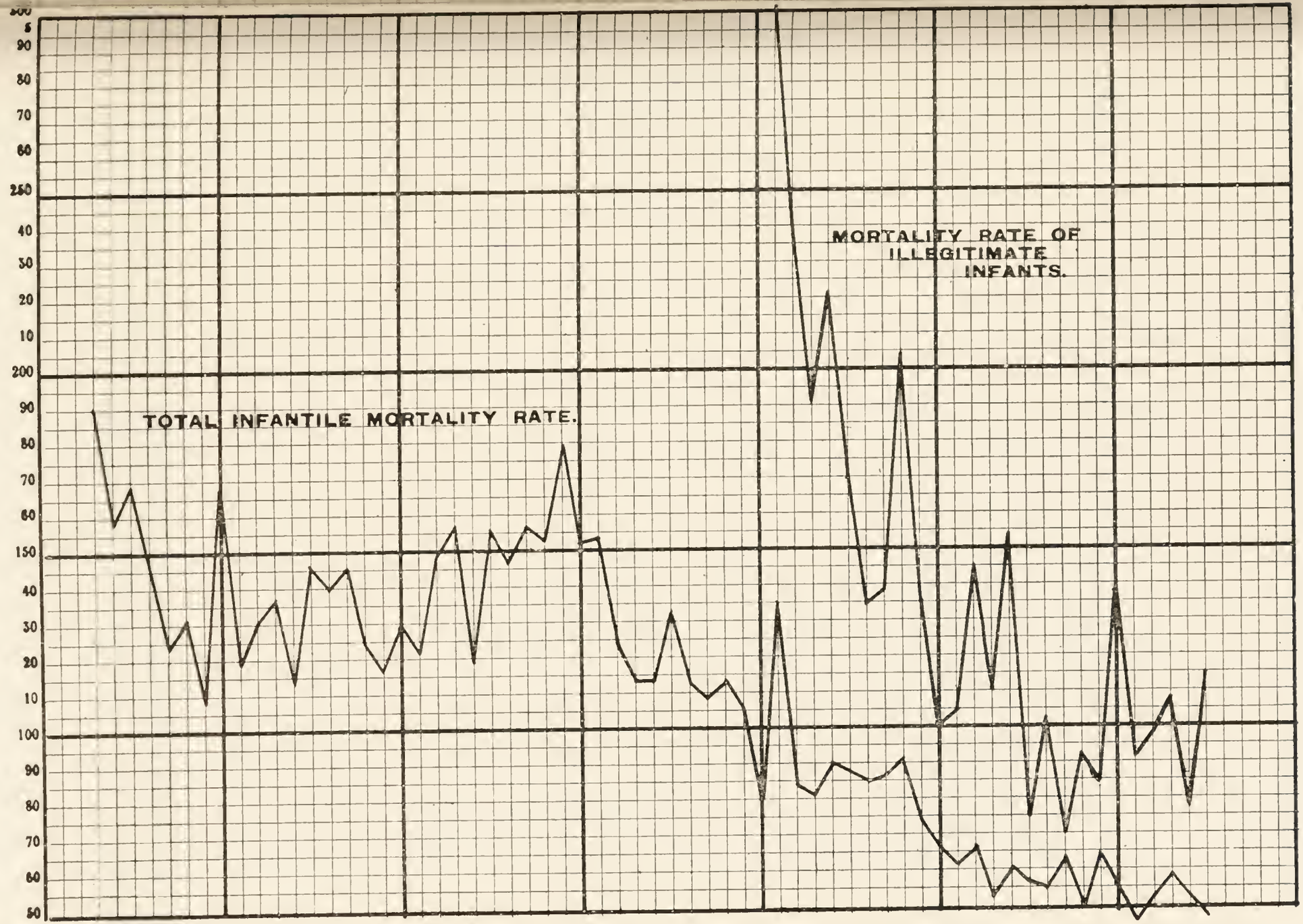
	Legitimate Infant Mortality Rate.	Illegitimate Infant Mortality Rate.
1931	46	92
1932	51	99
1933	55	109
1934	52	75
1935	42	120

Special attention is being given in the case of illegitimate infants, with a view to reducing the excessive mortality when compared with that of legitimate infants.

The infantile mortality rate per 1,000 births in the Municipal Wards is given in the following table. The Wards are tabulated according to the average rate for ten years, 1925–1934, the rate for the year 1935 being shown for comparison.

Ward.	Average 10 years, 1925-1934.	1935.
St. Denys	40.3 ...	57.9
Banister	41.4 ...	72.3
Newtown	43.9 ...	37.5
Portswood	44.7 ...	36.2
All Saints	47.8 ...	63.3
Bevois	48.4 ...	21.6
Bitterne and Sholing	50.3 ...	22.4
Millbrook	50.5 ...	64.6
Bitterne and Pear Tree ...	50.6 ...	44.0
Freemantle	55.9 ...	37.0
Woolston	56.1 ...	45.5
St. Nicholas	56.4 ...	58.1
Shirley	57.9 ...	38.3
Northam	59.1 ...	51.5
Trinity	63.2 ...	38.2
St. Mary's	73.2 ...	44.7
Town	80.9 ...	66.6
Borough	55.7 ...	46.0

The average rate is the index that should be taken of the infant mortality in the Wards. The rate varies considerably in a small area from year to year, where a few additional deaths occurring in any one year may double the rate of infant mortality



INFANTILE MORTALITY RATE PER 1000 BIRTHS IN SOUTHAMPTON SINCE 1873

INFANTILE MORTALITY, 1935.

Deaths from stated causes at various ages under 1 year.

Cause of Death.	Under 1 week.	1–2 weeks.	2–3 weeks.	3–4 weeks.	Total under 4 weeks.	4 weeks & under 3 months.	3 months & under 6 months.	6 months & under 9 months.	9 months & under 12 months.	Total Deaths under 1 year.
Small Pox	...	...	...	...	...	...	...	...	...	...
Influenza	...	...	...	...	...	...	...	...	...	...
Chicken Pox	...	...	...	...	...	...	...	...	...	...
Measles	...	...	...	...	...	...	1	...	...	1
Scarlet Fever	...	...	...	...	...	...	...	...	...	...
Whooping Cough	...	...	...	...	...	...	1	1	...	2
Diphtheria	...	...	...	...	...	...	...	...	...	...
Erysipelas	...	...	...	...	...	...	...	...	...	...
Tuberculous Meningitis	...	...	...	...	...	...	...	...	...	...
Abdominal Tuberculosis	...	...	...	...	...	...	...	...	...	...
Other Tuberculosis	...	...	...	...	...	...	...	...	...	...
Meningitis	...	...	...	...	...	1	1	...	...	2
Convulsions	2	...	...	...	2	...	...	...	...	2
Laryngitis	...	...	...	...	...	...	...	...	...	...
Bronchitis	...	...	...	...	...	2	...	1	...	3
Pneumonia (all forms)	...	...	1	...	1	...	2	4	3	10
Diarrhœa and Enteritis	...	...	...	...	...	1	4	4	2	11
Gastritis	...	...	...	...	...	...	...	...	...	...
Syphilis	1	...	...	...	1	...	1	...	...	2
Rickets	...	...	...	...	...	...	...	...	...	...
Pemphigus	...	...	...	...	...	...	...	...	...	...
Suffocation, overlying	...	...	...	...	...	1	...	1	...	2
Injury at birth	5	1	...	1	7	2	...	...	...	9
Atelectasis	4	...	...	...	4	...	...	...	...	4
Malformations	6	1	...	1	8	5	...	...	...	13
Premature Birth	37	2	2	...	41	4	...	...	...	45
Debility and Marasmus	2	...	2	...	4	2	1	...	...	7
Other Diseases and Causes ...	6	...	...	1	7	1	2	1	...	11
Totals	63	4	5	3	75	19	13	12	5	124

Maternity and Child Welfare.

MATERNITY UNIT.

This Unit is planned to provide a Maternity Section, Ante-Natal Clinic, Isolation Block, Reception Block and an Operating and Labour Block. The Unit will be connected with the Borough Hospital on a site north-west of the Hospital.

A separate entrance from Coxford Road will be provided to the Ante-Natal Department, which will comprise : Waiting, changing, doctors' rooms, together with small office, lavatories, etc.

Accommodation for 42 patients is provided, the wards being planned to obtain the maximum of sunshine. These consist of six four-bedded and two six-bedded wards, forming the east and west wings, with four single-bedded wards on the south, and one two-bedded ward on the east side.

Duty rooms, bathrooms, sluices, lavatories, etc., are provided to each wing of the Unit. The Nursery is situated on the south side of the building, between the two lying-in wings, one end of this room being equipped with babies' baths, sinks, etc., for use as a babies' bathroom.

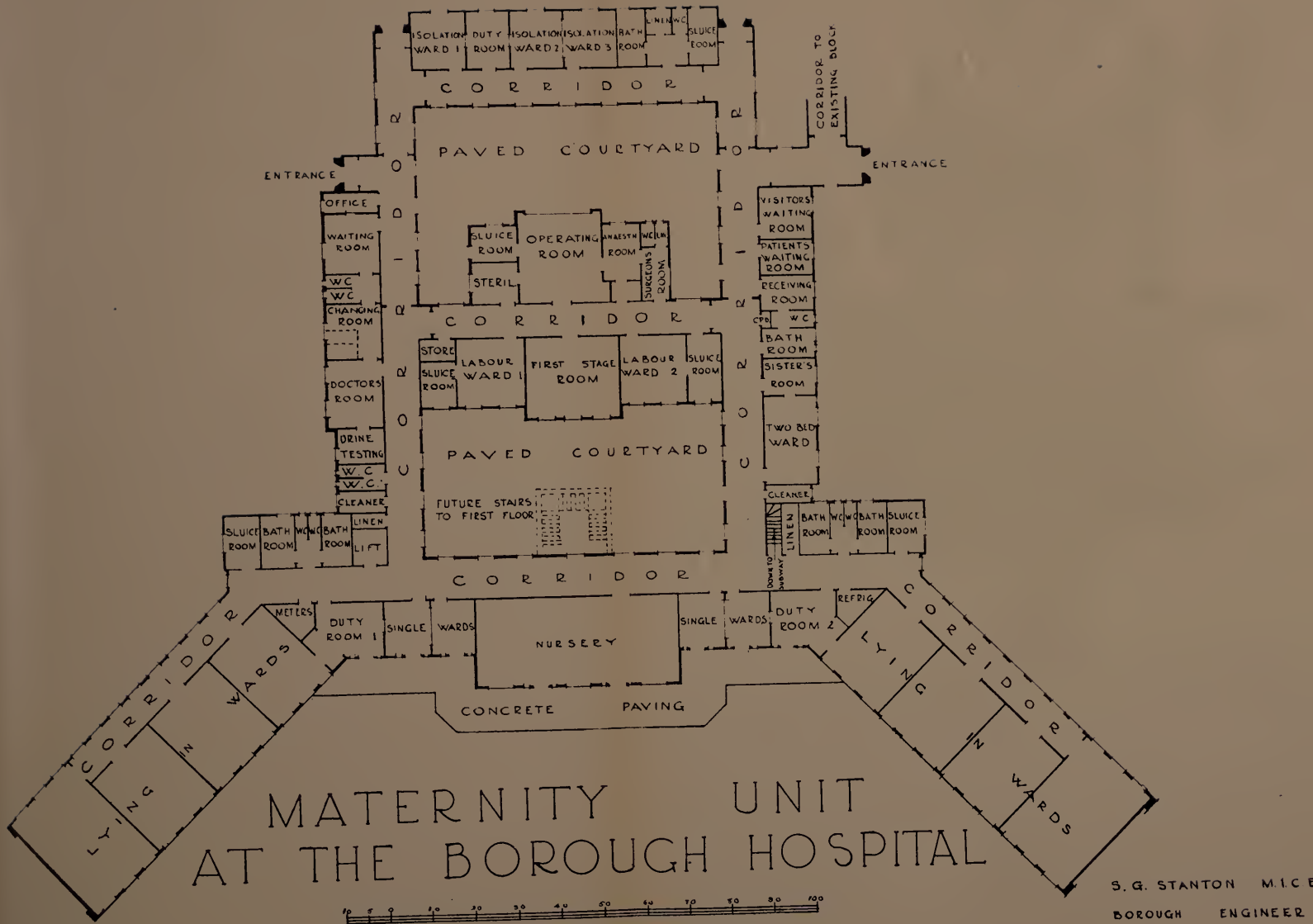
A covered verandah will be erected on the south wall of the Nursery, with French windows providing access from the Nurseries.

The Operating and Labour Block is situated in the centre of the building, with a large courtyard on each side isolating it from the rest of the building. It comprises the Pre-Labour Ward, containing four beds, Labour Wards and sluices, and an Operating Suite, complete with Anæsthetic, Sterilising, and Sluice Rooms, with a small dressing room provided for the Surgeons.

A covered-way from the existing Hospital will connect the new Unit to the Reception Block, which consists of visitors' and patients' waiting rooms, receiving room, bathroom, and Sisters' office.

Accommodation for three patients is provided in the Isolation Block which contains, in addition, separate duty room, bathroom and sluice.

The building is planned and constructed so that the whole of the Lying-in Department can be duplicated on the first floor, when such an extension becomes necessary, and in this connection provision has been made for a bed lift and staircase.



MATERNITY UNIT AT THE BOROUGH HOSPITAL

SCALE OF FEET

S. G. STANTON M.I.C.E.
BOROUGH ENGINEER

Externally, the walls will be of cavity construction of brickwork in cement, internally of solid brickwork, 9in. and 4½in. thick. The floors of corridors, sluices, bathrooms, etc., and the whole of the Operating Block and Labour Wards are of concrete, paved with terrazzo in squares, with dadoes of the same material. The floors of wards and other rooms are to be formed of oak flooring in narrow widths and wax polished. The walls of the Operating Room will be lined with " Vitrolite."

All flat roofs are to be constructed of reinforced concrete, plastered on the underside and covered with under-felt, and asphalt on top. A small hipped roof is to be formed over the Nursery, which will be covered with red roofing tiles.

Metal windows are to be used throughout, with a special type in the Operating Theatre.

All plastered walls will be painted.

The heating mains and hot and cold water and steam services will be extended from the present Boiler House. The existing heating system is a low pressure hot water installation, and the extension will be on the same principle.

Ventilation to the Wards, Nursery, Corridor, etc., will be by natural means, special extractors being provided to other rooms as necessary.

The two interior courtyards will be covered with green coloured cement, and the paths surrounding the Unit will be of gravel.

MATERNITY AND CHILD WELFARE.

The Welfare Centres are still overcrowded, and the Health Visitors have to spend much of their time in administration details, which should be devoted to work of health education. Some of the new suburbs are still not catered for, as no satisfactory premises can be found in these areas. The Council have under consideration the question of building a model Maternity Welfare Centre, close to the new Nursery School, which the Education Committee propose to erect at Chapel, or as an alternative in the Kingsland area, when re-development takes place. The Council also have in mind the building of Centres in the Swaythling and Coxford areas.

Towards the end of 1935 the Consulting Gynæcologist and Obstetrician commenced his duties, which include supervision of the maternity work in the Borough Hospital and the Maternity Home, and three sessions weekly for gynæcological, ante-natal and post-natal work. Cases where further pregnancy would be detrimental to the health of the mother are being referred to this Clinic for birth control advice.

The Dental, Sun-ray, Orthopædic, and Ear, Nose and Throat Clinics render most valuable service to mothers and young children referred from the Maternity and Child Welfare Department.

Dental treatment was given during the year in the following cases : Ante-natal cases 355, nursing mothers 73, children 107.

The enquiry into deaths in connection with child bearing has been carried on as before. Abortions cause a serious proportion of these deaths. The maternity services do not directly provide for the treatment of abortion, except in hospital, and there is often neglect or delay in obtaining medical aid, apart from cases where there is deliberate concealment.

Of the 19 cases investigated—one of them resided in the county area—four were due to abortion and one to ruptured tubal pregnancy. Six were due to eclampsia, one to acute yellow atrophy of the liver, one to diabetic coma, and one to fatty degeneration of the heart, one to obstetric shock, one to shock following obstructed labour (probably rupture of the uterus), and three to sepsis complicating other conditions. Toxic conditions thus again head the list as causes of death at or near term. Their relation to malnutrition has not been obvious.

The work of the Department may be classified as follows :—

(1) Provision for Maternity Services in the district.
  (a) Insurance Scheme for medical aid.
  (b) Inspection of Midwives.
  (c) Provision of Home Helps.
  (d) Inspection of Maternity and Nursing Homes.
  (e) Report on notifications of Puerperal Fever and Pyrexia.
  (f) Still Births.
  (g) Ophthalmia Neonatorum.

(2) Ante-natal Clinic at 23, East Park Terrace.

(3) Maternity Home at 2, East Park Terrace.

(4) Mothers' and Babies' Welcomes.

(5) Infant Clinic at 23, East Park Terrace.

(6) General advice to Mothers at 23, East Park Terrace.

(7) Clinic for Venereal Diseases at 23, East Park Terrace.

(8) Sydney House Clinic for Mothers and Infants.

(9) Health Visiting in the Homes.

(10) Grant of free and cheap fresh milk and sales at cost price or less of dried milk.

1 (a). Midwives Acts, 1918—1926. Insurance Scheme.

Section 14 of the Midwives Act, 1918, prescribes that in case of any emergency as defined in the Rules of the Central Midwives' Board, a midwife shall call in to her assistance a registered medical practitioner, and the Local Supervising Authority shall pay to such medical practitioner a fee in accordance with a scale fixed by the Ministry of Health.

The same section gives power to the Local Supervising Authority to recover the fee from the patient or from the husband or other person liable to maintain the patient, either summarily or otherwise as a civil debt, unless it be shown to their satisfaction that the patient or her husband or such other person is unable, by reason of poverty, to pay such fee.

Owing to the difficulty experienced in recovering such fees from the patient, an Insurance Scheme, approved by the Ministry of Health, was inaugurated in the Borough under Section 2 (3) of the Midwives and Maternity Homes Act, 1926. This Scheme was first put into operation on the 1st August, 1927, and briefly is as follows :—

An expectant mother, on booking her confinement with a midwife, may send the sum of 7/6 for a first pregnancy, and 6/- for any subsequent pregnancy to the Medical Officer of Health, which will insure her against any liability that may be incurred by the services of a doctor being requisitioned by the midwife in accordance with the rules of the Central Midwives' Board.

The number of cases from whom the insurance fee was received under the scheme during the year was 1,184, an increase of 100 compared with the previous year, but a decrease of 50 when compared with the number who insured in 1933.

The notifications received from midwives of sending for medical help totalled 1,048. The number of claims for fees received from medical practitioners during the year for insured patients was 685, and 269 for uninsured patients. Of the uninsured patients 43 were confined in the Municipal Maternity Home, 98 other patients were unable to pay owing to poverty, and in the remaining 128 cases accounts were sent by the Local Authority for the recovery of the whole or part of the fee.

(b.) Inspection of Midwives.

The number of midwives who notified their intention to practice in the County Borough during the year was 48. The supervision of the midwives was, until the middle of the year, carried out by the Superintendent Health Visitor, who was a qualified midwife, but a separate Inspector of Midwives was appointed by the Council to carry out these duties in August. The number of routine inspections made during the year was 153. The standard of midwifery work in the Borough is very high, and on the whole the results of the inspections were highly satisfactory.

The midwifery registers, ante-natal records, charts, etc., were well recorded and kept up to date.

The wearing of caps, overalls, masks and gloves are advocated, so as to reduce the danger of infection. When a case of infection is reported, the midwife is immediately taken off and a Queen's Nurse is put on to nurse the case. The Midwife and her appliances are afterwards thoroughly disinfected by the Local Supervising Authority, a Health Visitor being in charge of the disinfection.

The disinfection of the Midwife who comes in contact with any form of infection is carried out at the Disinfecting Station, West Quay. During the year the facilities for bathing and disinfection have been further improved, and everything done for the convenience and comfort of the midwives, a trained nurse being in attendance to supervise the disinfection of the equipment and appliances.

Lectures.—A course of post-certificate lectures was arranged through the Secretary of the Local Midwives' Association on various subjects connected with pregnancy and parturition. Speakers from the Midwives' Institute, London, attended, the Council contributing towards the cost of the fees of the lectures. In addition, lectures were given by myself and my medical assistants. The whole of the lectures were well attended and much appreciated by the midwives.

The following table shows the number of women in childbirth attended by midwives, and the percentage of still births to total births attended during the last 10 years :—

Year.	Number of Live Births Registered.	Number of Live Births attended by Midwives.	Number of Still Births attended by Midwives.	Percentage of Live Births attended by Midwives to Births registered during same period.	Percentage of Still Births among Births attended by Midwives.
1926	3141	2452	69	78.1	2.7
1927	2958	2332	68	78.8	2.8
1928	3077	2220	45	72.7	2.0
1929	3232	2300	68	71.2	2.4
1930	3294	2369	51	71.9	2.2
1931	3042	2118	64	69.6	2.9
1932	3056	2260	61	73.9	2.7
1933	2916	2000	53	68.6	2.7
1934	2828	1977	47	69.9	2.3
1935	2764	1921	55	69.5	2.8

The following notifications from midwives were received by the Local Supervising Authority during the year :—

Notification of intention to practice ...	48
Notifications received of sending for medical aid (for mothers 837, for child 182) ...	1019
Notification of Still Births	46
,, ,, Artificial Feeding	31
,, ,, Death of Infant	12
,, ,, contact with infectious disease	15
,, ,, Puerperal Fever	6
,, ,, Puerperal Pyrexia	22
,, ,, Ophthalmia Neonatorum ...	38
,, ,, Pemphigus	2
,, ,, Watery Blisters	5
,, ,, Laying out dead body ...	2
Routine Inspection of Midwives (Inspector of Midwives)	153
Special Visits of Enquiry (Inspector of Midwives and Health Visitors)	1100
Visits to Nursing Homes	85

The special visits of enquiry include those visits paid by the Health Visitors to assist in the investigation of special cases, and enquiries made in connection with claims under the Insurance Scheme.

The conditions for which medical aid was sought by the midwives during 1935 were :—

MOTHER.

Ante-Partum Hæmorrhage		32
Post-Partum Hæmorrhage		12
Premature, delayed and prolonged labour ...		101
Mal-presentation		35
Retained Placenta		23
Ruptured Perineum		197
Threatened Abortion or miscarriage		31
General Condition unsatisfactory—		
Ante-natal	251	268
Post-natal	17	
Rise of Temperature		25
Albuminuria		45
Thrombosed or Varicose Veins		23
Vaginal discharge		45
		—— 837

INFANT.

Death of Infant		1
Premature Birth		9
Dangerous Feebleness		16
Malformation of Infant		18
Tongue Tie		—
Discharge from Eyes		72
Skin Trouble		14
General Condition unsatisfactory		41
Still Births		11
		—— 182
Total		1019

Midwives' Fees.

Applications were received for the payment of the midwives' fees in certain cases. The applications were investigated, and where it was shown that no maternity benefit was available, and the applicant was unable to pay, the fee of the midwife was paid by the Council. The fees were paid in thirty cases during the year, this being an increase of five over those granted in the previous year.

In normal cases the midwives attend for the confinement and for ten subsequent days, visiting twice daily for the first three days, and once a day afterwards for as long as necessary. The standard fees charged by the local midwives are: Primipara, £2 7s. od.; multipara, £1 15s. od.

(c.) Home Helps.

The question of the supply of Home Helps is one which has received the careful consideration of the Sub-Committee appointed to meet once a month to consider applications for payment of women to look after the mothers and children during the confinement and puerperium period. Each case is considered on its merits, and income of the applicants, and in some special conditions the Committee may interview the expectant mother or the home help.

During the past year 206 new cases were considered, together with the re-consideration of 19 cases referred for further information. In 163 cases the application was granted and the fee of the home help paid.

There is not the least doubt that the supply of a home help has most beneficial results, both to the patient and the child, and the mothers are most grateful for the assistance given.

The usual period granted is two weeks, but this has been extended where the mother has been removed to Hospital, and the children would otherwise be neglected if the home help was withdrawn. There is no doubt that this branch of the service is proving of the highest value by giving the mother a rest from the anxiety of running the home, and an opportunity of establishing breast feeding.

The following are the rules adopted for governing the work of home helps:—

(1) The home help must attend daily at the home to which she is sent from 8 a.m. (half-day on Sundays). The usual period for which she will be required for each case will be 14 days. Free time during the afternoon can be arranged with the patient.

(2) She must—

(a) Keep the house clean and tidy.
(b) Cook and prepare meals for the family.
(c) Care for any children there may be, and see that those attending school do so punctually, and are clean and tidy.
(d) Do the necessary washing (except arrears), including linen soiled during the confinement.

(3) She must not interfere with the instructions of the doctor or midwife, and must recognise that she is not a nurse, but simply a domestic help.

(4) Where a case of infectious disease occurs in the house of a home help, or in the family of the patient, or should the home help come in contact with infection, she must report at once to the Superintendent Health Visitor at the Clinic.

(5) Application for payment will be made at the Maternity Clinic as soon as proof is obtained of satisfactory service. The rate of pay will be 15/– (less National Health Insurance where indicated) for a full week, including half-day on Sunday, extra for night duty when necessary. Where less than a full week is worked, a proportionate deduction will be made.

(6) The patient to contribute according to her means.

(7) Any conduct on the part of the home help which is contrary to the interests of the household where she is employed will, if brought to the notice of the Clinic, lead to her name being removed from the list.

(8) Home helps are specially warned that they must not in any circumstances gossip about the affairs of the families to which they have been sent.

Scale of Income of Applicants.

Man and wife	7/– per head, after deducting rent from income.
Man and wife and one or two children	Ditto.
Man and wife and three children ...	6/– ditto.
Man and wife and four children or more	5/– ditto.

The Committee have also dealt with the admissions to the Maternity Home, in accordance with the scale of income laid down. Following investigation no fee was charged to necessitous cases, and a reduced fee in exceptional cases.

There is at times difficulty in fixing up mothers with help, owing to a lack of suitable women on our books.

(d.) Nursing Homes Registration Act, 1927.

This Act, which came into operation on the 1st July, 1928, repealed Section II of the Midwives and Maternity Homes Act, 1926, made it an offence for any person to carry on a Nursing Home or Maternity Home unless registered under the Act for that purpose.

The Homes have been more rigidly inspected during the year, and regular inspections have taken place each quarter. The number of inspections carried out during the year was 89.

The standard of the Homes on the whole is good; the larger Homes being of high standard. Visits by the Inspector and suggestions made have been well received, and acted upon. There were four applications for registration during the year, all of which were granted.

Nursing of Cases.

An annual grant is made by the Local Authority to the local branch of the Queen's Nurses, who have nursed 163 cases referred to them by the Health Department during the year. The following is a record of the cases and the number of visits paid :—

	Cases.	Visits.
Puerperal Fever	2	46
Confinements (Midwife suspended) ...	15	135
Contact Scarlet Fever (1)	—	—
Contact Measles (1)	—	—
Contact Pemphigus (11)	—	—
Patient with Boils (1)	—	—
Congestion (1)	—	—
Phlebitis following Confinement	1	14
Phlegmasia Alba Dolens	1	32
Breast Abscess	10	386
Mastitis	2	66
Ophthalmia Neonatorum	2	26
Pemphigus	11	197
Pneumonia	46	957
Influenza	5	40
Tuberculosis	40	2,360
Chicken Pox	1	32
Measles with Pneumonia	3	48
Erysipelas	3	52
Children under 3 years (not included in the above)	21	218
	163	4,609

The Queen's Nurses continue to render valuable assistance to the Local Authority, often in trying circumstances. The co-operation between the Queen's Nurses and the Health Department staff makes both branches invaluable to the patients.

PUERPERAL FEVER.

There were six cases of Puerperal Fever notified during the year 1935, which occurred in the practices of medical practitioners. Three of the cases were removed to Hospital for treatment, and in two of the cases not removed to Hospital nursing was provided by the Department.

Investigations were made into each case, and the causes, or predisposing causes, were given as follows :— One case Phlegmasia Alba Dolens ; one Lung infection ; one Macerated Fœtus ; one Acute Mastitis with acute infection of the axillary glands ; one localised Sapræmia, and one of acute renal infection. One case proved fatal.

PUERPERAL PYREXIA.

There were twenty-two cases of Puerperal Pyrexia notified during the year 1935. Six cases were notified from the Borough Hospital ; eleven cases were notified by general medical practitioners ; three cases were notified from the Royal South Hants and Southampton Hospital ; and two cases were notified from the Municipal Maternity Home.

Eight of the cases notified by medical practitioners occurred in the practice of midwives, who called in medical aid ; of these, seven were removed to Hospital, and a midwife carried out the nursing in the other. One doctor's case was removed to Hospital, and in the remaining two cases nursing was provided at home under the supervision of the doctor.

Investigation was made into the predisposing causes, and, as far as could be ascertained, the causes were :—

Localised Infection (Renal)	3
Twin Pregnancy	3
Adherent Placenta	1
Phlegmasia Alba Dolens	1
Acute Mastitis	3
Miscarriage	2
B. Coli Infection (urine culture showed evidence)	1
Ante-Partum Hæmorrhage with definite lateral Placenta Prævia	1
Pyelitis of Pregnancy	1
Post-Partum Hæmorrhage	1
Congestion of both Lungs	1
Toxæmia, due to Macerated Fœtus	2
Uterine growth	1
Miscarriage (5 months)	1

With the exception of the one death from Puerperal Fever and three deaths from Pyrexia, the cases made good recovery.

Investigation was made at once, and immediate steps taken to safeguard the patients and spread of infection.

Queen's Nurses were provided where necessary, special nursing and Home Helps for extended periods. The midwives were disinfected, and the Health Visitors attended to disinfection of bags and equipment ; the Home Helps were also disinfected. The necessary disinfection was carried out in the registered homes, and, where possible, in the homes of midwives and patients.

STILL BIRTHS.

One hundred and eleven still births came to the knowledge of the Department during the year 1935. Of these, ninety-six were notified, and the remaining fifteen cases were not notified.

Of the ninety-six notified cases, forty-seven occurred in the practice of the midwives. Twenty-one cases occurred in the practice of doctors ; fourteen cases occurred at the Borough Hospital ; two at the Royal South Hants and Southampton Hospital ; and twelve in the Municipal Maternity Home.

As far as could be ascertained, the predisposing causes were chiefly due to the following :—

10 Pelvic Contraction.
4 Uterine growths.
8 Complicated breech in Primipara.
2 Unavoidable accidents.
2 Toxæmia, and acute Renal infection.
6 Albuminuria, accompanied by high blood pressure.
5 Mal-presentation of cord.
4 Eclamptic fits, shock, etc.
12 Placenta Prævia, with Ante-Partum Hæmorrhage.
5 Twin pregnancy.
26 Premature birth.
3 Malformation of child, such as Spina Bifida.
3 Hydracephalic conditions.
6 No history obtainable.

Of the above cases investigated, 26 were premature ; 24 were macerated ; 5 were twin pregnancy ; 3 were malformed ; and 6 were monstrosities.

Ophthalmia Neonatorum.

There were thirty-eight cases of Ophthalmia Neonatorum notified during the year 1935, twenty-eight of which were treated at the Eye Hospital.

On the following list particulars are given of each case notified and showing the present condition of the eyes. The cases have all been carefully followed up, and, so far as could be ascertained, with the exception of the case removed to Middlesborough, the vision was unimpaired. To the prompt notification of the cases, with immediate following up and treatment, can be attributed the excellent results obtained.

The following is a summary of the results of the treatment of the cases notified :—Treated at home, 6 ; treated at home and Hospital, 29 ; treated at Hospital only, 1 ; treated at home and Clinic, 1 ; removed from Borough, 1 ; vision unimpaired, 37 ; vision impaired, 0 ; Blind, 0 ; died, 0 ; lost sight of, 1 ; number of cases at which Queen's Nurses attended, 2.

OPHTHALMIA NEONATORUM. Particulars of cases notified.

(This Table is inserted by request of the Ministry of Health).

No.	CASES. Notified.	Treated: At Home.	Treated: In Hospital.	Vision Unimpaired.	Present Condition.	Remarks.
1	January 2nd ...	Yes	Yes	Yes	Well	Born at Nursing Home. Discharging after leaving Home. Treated at home and in Hospital. Discharged cured, 25/1/35.
2	February 1st ...	Yes	No	Yes	Well, when last seen	Treated only at home. Left for Nottingham, but eyes quite clear, 17/4/35.
3	,, 23rd...	Yes	No	Yes	Well	Treated only at home. Clear, 16/3/35.
4	March 6th ...	Yes	Yes	Yes	Well	Treated at home and in Hospital. Discharged cured from Eye Hospital, 15/3/35.
5	,, 14th ...	Yes	Yes	Yes	Well	Treated at home and in Hospital. Removed to Borough Hospital, and on return eyes quite clear.
6	,, 21st ...	Yes	No	Yes	Well	Baby born in Borough Hospital. Attending M. and C.W. Clinic. Eyes clear, 10/4/35.
7	,, 27th ...	Yes	Yes	Yes	Well	Treated at home and in Hospital. Clear, 9/4/35. Discharged from Eye Hospital cured, 14/4/35.
8	,, 29th ...	No	At Maternity Home	Yes	Well	Baby born at Maternity Home and treated there. Eyes quite clear, 8/8/35.
9	April 1st ...	Yes	Yes	Yes	Well	Treated at home and in Hospital. Infant reported discharged from Eye Hospital cured, 4/35.
10	,, 12th ...	Yes	Yes	Yes	Well	Treated at home and in Hospital. Sent to Hospital by Doctor. Clear, 22/10/35.
11	,, 21st ...	Yes	Yes	Yes	Well	Treated at home and in Hospital. Discharged from Eye Hospital cured, 26/8/35.
12	,, 23rd ...	Yes	Yes	Yes	Well	Treated at home and in Hospital. Clear, 5/35.

OPHTHALMIA NEONATORUM. Particulars of cases notified.—continued.

No.	CASES. Notified.	Treated		Vision Unimpaired.	Present Condition.	Remarks.
		At Home.	In Hospital.			
13	April 24th ...	Yes	Yes	Yes	Well	Treated at home and in Hospital. Discharged from Eye Hospital cured, 27/5/35.
14	May 2nd ...	Yes	Yes	Yes	Well	Treated at home and in Hospital. Discharged from Eye Hospital cured, 13/6/35.
15	,, 30th ...	Yes	Yes	Yes	Well	Treated at home and in Hospital. Discharged from Eye Hospital, and cured, 20/6/35.
16	,, 30th ...	Yes	Yes	Yes	Well	Treated at home. Eyes cleared up.
17	June 3rd ...	Yes	Yes	Yes	Well	Treated at home and in Hospital, 20/6/35, had ceased attending Eye Hospital, and quite cured.
18	,, 8th ...	Yes	Yes	Yes	Well	Treated at home and in Hospital, 13/6/35. Went to the Eye Hospital and discharged cured. Eyes open and clear.
19	,, 18th ...	Yes	Yes	Yes	Well	Treated at home and in Hospital. 19/8/35, eyes better, reported discharged from Eye Hospital about three weeks ago.
20	,, 19th ...	Yes	Yes	Yes	Well	Treated at home and in Hospital. Baby born at the Borough Hospital. Seen at Welfare. Child discharged from Eye Hospital cured, 8/35.
21	,, 25th ...	Yes	Yes	Yes	Well	Treated at home and in Hospital. Discharged from Eye Hospital cured, 30/7/35.
22	July 13th ...	Yes	Yes	Yes	Well	Treated at home and in Hospital. Attended Hospital daily. Reported discharged cured, 14/10/35.
23	,, 15th ...	Yes	Yes	Yes	Well	Treated at home and in Hospital. Attending Hospital daily for time, then weekly. Discharged cured, 18/10/35.

OPHTHALMIA NEONATORUM. Particulars of cases notified.—continued.

No.	CASES. Notified.	Treated		Vision Unimpaired.	Present Condition.	Remarks.
		At Home.	In Hospital.			
24	July 16th ...	Yes	Yes	Yes	Well	Treated at home and in Hospital. Visited 10/9/35. Clear.
25	,, 18th ...	Yes	No	Yes	Well	Treated only at home. Eyes quite clear when visited, 9/8/35.
26	,, 29th ...	Yes	In Borough Hospital	Yes	Well	Treated at home and in Borough Hospital. Eyes quite normal when visited, 3/9/35.
27	August 3rd ...	Yes	Yes	Yes	Well	Treated at home and in Hospital. Discharged cured, 12/8/35.
28	,, 8th ...	Yes	Yes	Yes	Well	Treated at home and in Hospital. Eyes quite clear when visited on 16/8/35.
29	,, 28th ...	No	In Borough Hospital	Yes	...	Infant removed to Middlesborough, 7/9/35.
30	,, 28th ...	Yes	Yes	Yes	Well	Treated at home and in Hospital. Discharged cured, 4/9/35.
31	,, 31st ...	Yes	Yes	Yes	Well	Treated at home and in Hospital. Discharged from Eye Hospital cured, 9/9/35.
32	September 3rd...	Yes	Yes	Yes	Well	Treated at home and in Hospital. Eyes clear when visited, 14/10/35.
33	,, 27th...	Yes	No	Yes	Well	Treated only at home. Eyes satisfactory when visited, 2/10/35.
34	October 8th ...	Yes	No	Yes	Well	Treated only at home. Eyes clear when last seen, 29/11/35.
35	,, 11th ...	Yes	Yes	Yes	Well	Treated at home and in Hospital. Discharged from Eye Hospital after second attendance. Eyes clear, 17/10/35.
36	,, 11th ...	Yes	Yes	Yes	Well	Treated at home and in Hospital. Discharged from Eye Hospital on third visit. Eyes quite clear, 21/10/35.
37	December 19th	Yes	Yes	Yes	Well	Treated at home and in Hospital. Eyes quite clear, 25/12/35.
38	,, 23rd	Yes	Yes	Yes	...	Treated at home and in Hospital. Last seen 8/1/36. Eyes improving, still attending Eye Hospital.

PEMPHIGUS.

A small outbreak of Pemphigus occurred during the year, four being notified by medical practitioners, and others came to the notice of the Department during the investigations. The number of suspected cases visited by the officials was 18, and the number of contacts in these cases was 30. Of these, thirteen developed watery blisters, but were not definitely diagnosed as Pemphigus. The midwives who had come in contact with the cases were immediately taken off, and thoroughly disinfected at the Out-bathing Station. The Queen's Nurses were put on to relieve the midwives, and gave the necessary nursing attention to eleven cases.

2. ANTE-NATAL CLINICS.

The numbers attending these Clinics have again increased slightly, and treatment has often been necessary. While the majority of these patients are booked for the Maternity Home or the Borough Hospital, the outside midwives are seeking advice for their cases in considerable numbers, especially where problems of malnutrition and poverty complicate their work.

3 (a). MATERNITY HOME.

This is registered for nineteen beds, including those needed for ante-natal treatment of booked patients. Quite a number of those booked have been recommended by the family practitioner, and these have required considerable periods of residential treatment on account of general conditions complicating pregnancy. Three hundred and eleven confinements took place, and one patient was admitted just after delivery. Fifteen cases were delivered by doctors. The still birth and neo-natal death rate was high, chiefly on account of the antecedent condition of the mother. Two cases of Puerperal Pyrexia were notified, one of which was removed to hospital. Both did well.

The Committee investigate the admissions to the Maternity Home in regard to free or reduced fees.

A rota of visitors from the same Committee visit the Maternity Home once a month.

4. MOTHERS' AND BABIES' WELCOMES.

There are eight Municipal Child Welfare Centres, one of which holds two sessions each week. Apart from advice on infant feeding and care, they are used for the distribution of dried milk, cod liver oil, and other nutrients. Opportunities for education are insufficient owing to the number attending each

session. In some of the Centres immunisation against Diphtheria is carried out. The voluntary workers are most conscientious, and we should welcome further assistance from other voluntary workers.

The number of individual children attending the Welcomes at the close of 1935 under one year of age, was 1,069; one to five years, 2,215; total, 3,284. It will be noticed that the one to five figure has increased this year.

Four Welcomes are run by voluntary service only, and are well attended.

The total attendances at the Municipal Welcomes are shown in the following table:—

Welcome.	Ante-Natal.	Mothers.	Babies under 1 year.		Toddlers.			Weighings.	Consultations.	Lectures.
			Old.	New.	1—2 years. Old.	2—5 years. Old.	1—5 years. New.			
'inton Street	30	3,567	2,913	115	801	435	23	2,107	3,169	—
astern ...	47	2,894	1,399	103	1,121	824	26	1,402	2,878	—
irley ...	—	2,709	2,029	144	1,131	928	54	1,414	1,833	2
oolston ...	81	3,392	2,541	157	1,066	1,169	44	2,716	1,848	1
ortham ...	7	1,827	1,185	45	428	488	9	1,041	1,496	3
rtswood ...	319	7,473	4,276	258	2,276	3,306	90	3,667	3,328	8
itterne ...	—	2,789	2,005	174	768	451	57	3,014	2,117	—
ydney House) echabite Hall	20	4,038	2,970	174	872	1,495	13	2,216	1,893	2
Totals ...	504	28,689	19,318	1,170	8,463	9,096	316	17,577	18,562	16

Seventy children attended right up to the age of five. The rest dropped off, or were admitted to nursery classes, or attend the Clinics for sick children, if ailing, or were taken to the family doctor if the parents thought it necessary.

5. Clinic for Infants at 23 East Park Terrace.

This is intended for minor ailments in children who are not under other medical care. A certain number only need supervision, but cannot be seen satisfactorily at the outlying Welfare Centres. Enquiry into economic circumstances is made in each case. Feeding troubles, skin diseases, coughs and colds, mental defect, and convalescents from infectious diseases form the bulk of the cases. The after-results of the diphtheria epidemic provided a number of patients in 1935.

The following is a record of work done :—

Number of medical consultations—			
New cases :	Ante-natal	664	
	Mothers...	68	
	Babies under 1 year ...	201	
	Children, 1 to 5 years...	123	
Old cases :	Ante-natal	2,017	
	Mothers...	212	
	Babies under 1 year ...	1,870	
	Children, 1 to 5 years...	2,011	
	Total	———	7,466
Babies weighed			2,635
Number of treatments given to mothers and children			3,897
Number of individual persons for whom medicines were dispensed			7,647

Five hundred and forty-nine individual children were treated or supervised during the year at this Clinic. In addition, nursing mothers receive treatment to enable them to continue breast feeding.

6. General Advice to Mothers.

Under this heading is included a great deal of individual instruction in mothercraft, advice on conditions arising in the home or among the family. A number of medical and social emergencies must be considered, involving reference to private doctors or philanthropic agencies, recommendation of private midwives, of foster-mothers or nurses.

The Superintendent Health Visitor deals with many matters appertaining to the welfare of children, amongst which are enquiries made by women who desire to adopt children under the Adoption of Children Act, and are advised as to the course of procedure in obtaining and adopting the child, or women who are seeking to take children under the Children Acts. Advice is also given to girls seeking help, and many are referred to the Officer of the Women's Hostel. The Superintendent Health Visitor also interviews those desiring the service of a midwife, and these are provided by the Council, or the assistance of a home help. The work of this section is very considerable, owing to the amount of advice and detail involved.

In certain cases, where the Medical Officer considers that a further pregnancy would be injurious to the health of the mother, advice is given regarding birth control.

Number of general consultations by Medical Officer, Superintendent Health Visitor, and the Sister in Charge at No. 2 East Park Terrace	2,447
Number of consultations for ante-natal and maternal advice	1,268
Other interviews and information supplied ...	5,823

7. Clinic for Venereal Diseases in Women and Children.

This deals with a number of expectant mothers and young children, who receive ante-natal, post-natal, and welfare supervision, in addition to their special treatment. Six cases attending the Clinic were admitted to the Municipal Maternity Home, and five healthy children were born. Several cases were admitted to the Borough Hospital for confinement with success. Every ante-natal attending has a Wasserman test performed.

Health Visitors.—The Health Visiting Staff consists of 10 Health Visitors, and one relief Health Visitor, each being responsible for all the work in an allocated area, viz., Maternity and Child Welfare, Tuberculosis visiting, and School work. This makes for easier working, as the parents do not resent in the same manner one nurse visiting when she can advise on all matters, as they would if there were separate visits paid for each condition.

The visiting of Maternity and Child Welfare cases has been carried out in the same manner as in previous years, although there is a certain difficulty in maintaining records owing to the constant migration of families who leave no addresses, but owing to the co-ordination of the work, these families are often found again through school visiting or Tuberculosis cases.

The Health Visitors also each attend the Welcomes which serve their own districts, which is a great encouragement to the mothers.

SYDNEY HOUSE.

Maternity and Pre-School Child Clinic.

This Clinic is primarily for children between the ages of three and five years, and is held on Monday afternoons. The object is to supervise the children before their entrance to school, and to remedy or allay any physical defects by more appropriate attention to diet, including the addition of vitamins in the form of oil and malt. Many cases are referred to the Dental and Throat Surgeons for the removal of infective foci in the mouth, etc., or from respiratory passages. Many eye conditions also, if left till seen in the school, become permanent disabilities, whereas attended to in the earlier years of life become either cured or considerably improved. One cannot over-estimate the value of such Clinics, as it is all too frequently the case that most children are lost sight of from the time they cease attending the Welfare Centres, about the age of thirty months, till they appear two and a half years later in the various schools of the town. During these missing years the children are increasing the scope of their mental and physical capabilities, and entering the full vigour of childhood. It is during this time, too, that the young body comes into closer contact with the general outside environment, and thereby encounters the influences, infectious or otherwise, that act harmfully upon its constitution. These, recognised before health is materially affected, enable the child to enter its school career unimpeded by the catalogue of ailments usually met with in the first year of school life. During 1935, 200 individual children attended this Clinic, of whom 140 were between the ages of two and five years.

A certain number of weakly babies are also seen for more careful attention than can be done in the hurry of a Welfare Centre.

It is hoped that in 1936 artificial sunlight facilities will be available at Sydney House, allowing better treatment for the cases of rickets or physically defective children generally.

Ante-Natal Clinic.

Up till November, 1935, part of the Monday afternoon sessions was set apart for ante-natal work. During the year the attendance increased to a higher level than ever before, due to a large extent to the greater co-operation of the midwives of the district. The patients were seen at varying intervals throughout the pregnancy, and the urine examined at each attendance. Any deficiency of nutrition was attended to by the administration of milk, malt and oil, calcium, and some of the iron preparations, and the general bodily hygiene advised upon. The Dental Surgeon

examined and treated any cases of dental caries. If any possible or definite abnormality in the condition of the patients was diagnosed, they were X-rayed at the Borough Hospital, and any necessary accommodation arranged for them during the pregnancy or late in childbirth.

Towards the end of the year a special session was set aside on Tuesday afternoons for ante and post-natal "patients," under the Consultant for maternity work appointed by the Local Authority.

The extra time now available in the Monday sessions will allow better facilities for the pre-school Clinic.

Welfares at Sydney House and Woolston.

During 1935 the number attending these centres continued to increase, until it became almost impossible to cope with them. At Sydney House the attendances were, on the average, of 90–100 babies, a number which precluded the possibility of the Health Visitors in attendance giving any general child hygiene instruction to the mother. As the district is a growing one, the number should still become greater, necessitating in the near future another welfare centre or another afternoon session, with a greater number of helpers and Health Visitors, so that the Health Talks and Demonstrations which are of considerable value to the young and sometimes ignorant mothers may be regularly given.

Lectures by the Medical Officers have had to be given up, unfortunately, owing to the lack of facilities of looking after the toddlers during those times, and to the general bustle and hurry of the now rather over-crowded Clinics.

The following gives the particulars of the Maternity and Child Welfare work carried out at Sydney House Clinic during the year:—

Number of medical consultations:—

New cases:	Ante-natal	63
	Mothers	7
	Children	177
Old cases:	Ante-natal	191
	Mothers	16
	Children	415
		869

Babies weighed	106
Number of children who received medical treatment	575
Number of interviews for general advice ...	209
Dispensing	783

9. Health Visiting in the Homes.

The staff carrying out this work, although not fully adequate to cope with the increasing population, have succeeded in keeping accurate and full records. The health visiting staff consists of ten Health Visitors and one relief Health Visitor. The records show that the frequent absence from home of the mother leads to much loss of time, and some children get missed altogether, especially if the mother is not keen on being visited. A certain difficulty in maintaining records is found owing to the constant migration of families who leave no addresses (mostly families who need our constant supervision), but owing to the co-ordination of the work, these families are often found again through school children or tuberculosis cases.

Each Health Visitor has a separate district, and is responsible for the visiting of all cases residing in her area.

The Scheme of Health Visiting is as follows :—

1. On Receipt of Birth Notification.

(a) Every case where a doctor is not in charge is visited by the Health Visitor as soon as possible before the 10th day.

(b) Where a doctor is in attendance at the birth—after he has ceased visiting.

(c) The Health Visitor, on her first visit, leaves the address of the nearest Infant Welfare Centre, and endeavours to get the mother to attend.

2. Children under One Year.

Are re-visited once a month up to three months, then once every three months up to one year.

3. Children between 1—2 Years.

Are visited once every six months.

4. Children between 2—5 Years.

Are visited at least once a year.

The records are kept by the Health Visitors on cards, which, when the child reaches the age of five years, are passed on to the School Medical Department.

The above Scheme refers only to routine visiting and applies to those cases that appear to be running a normal course. Cases needing special treatment or showing any defect or deformity are kept under closer surveillance.

The following is a record of visits made by the Health Visitors during the year :—

Visits in connection with Midwives' Acts ...	1,467
Visits to expectant mothers	1,608
First visits to infants under one year of age ...	2,941
Re-visits to infants under one year of age ...	12,763
,, ,, children over one year of age and under school age	14,994
Visits to cases under Ophthalmia Neonatorum Regulations	50
,, ,, cases of Pneumonia, Measles, Chicken Pox and Mumps	872
Visits in connection with free milk	1,330
,, ,, ,, Orthopædic Clinic ...	183
Visits to nurse children under Children Act ...	840
Other visits...	1,683

10. Grants of Free Milk, Cod Liver Oil, etc.

During the past year 1,830 families received free or cheap milk, as compared with 1,807 for the year 1934.

Application forms for the supply of milk under the Authority's Scheme are given by the Health Visitors on application being made to them either at the Welcomes, Clinics, or when visiting cases at the homes. The form is then returned, completed and signed by two applicants, to the Medical Officer to whom the mother or child is known. The supply of milk can only be granted to applicants seen by the Medical Officer, and who attend one of the Welcomes or Clinics for this purpose, and often the applicant is not prepared to comply with these Regulations laid down by the Ministry of Health and Corporation. It is obvious that grants of free milk cannot be given on the grounds of health necessity unless the doctor is in a position to certify to this effect.

The applications are scrutinised by the Milk Sub-Committee each month, but emergency grants of fresh and dried milk are issued on the authority of the Medical Officer in the interim, which are confirmed by the Sub-Committee at the next meeting. Any refusals by the staff are referred to the Sub-Committee, with the reason for such refusal, for consideration.

Cod Liver Oil remains the staple nutrient preparation given to the patients attending the Maternity and Child Welfare Centres to aid growth and resistance to infection. Very few children are unable to take it. Some other preparations are sold much below cost to aid breast-feeding and nutrition of very young children.

The total free fresh milk granted during the year was 258,844 pints, compared with 253,158 pints in 1934; free dried milk 22,592-lbs., compared with 20,441-lbs. in 1934.

Only pasteurized milk treated by the retarded process is supplied to mothers and infants under the Council's Scheme.

During the year the following grants of free fresh milk were made :—

	Average number on books.	Total amount supplied in pints.
Expectant mothers	76 ...	26,193
Nursing mothers	204 ...	72,109
Infants under 6 months ...	41 ...	14,296
Infants between 6 months and 5 years of age	431 ...	146,246

Grants of milk at less than cost price.

The following amounts were supplied :—

	Average number on books.	Total amount supplied in pints.
Expectant mothers	1 ...	301
Nursing mothers	2 ...	585
Infants under 6 months	1 ...	224
Infants between 6 months and 5 years of age	6 ...	2,012

The following grants of free dried milk, etc., were also made :

	Average number on books.	Total amount supplied in lbs.
Expectant mothers	1 ...	47
Nursing mothers	3 ...	193
Infants under 6 months	65 ...	6,291
Infants between 6 months and 5 years of age	161 ...	16,061
Issues of Malt and Cod Liver Oil, in lbs.	— ...	Free. 7,934
Ditto from Sydney House ...	— ...	449

The amount of dried milk issued at less than cost price was 417-lbs., and was given for: 16 infants under 6 months, and 36 infants between 6 months and 5 years of age.

The following figures give further particulars as to the distribution of free milk during 1935 :—

Number receiving fresh milk, December 31st, 1934					778	
,,	,,	dried milk	,,	,,	,,	230
						—— 1,008
,,	,,	fresh milk	,,	,,	1935	788
,,	,,	dried milk	,,	,,	,,	229
						—— 1,017

Sale of Dried Milk at Cost Price.

Many of the parents after completion of treatment are enabled to buy dried milk at cost price at the various centres, in order that the good results obtained in the treatment may be continued. Three brands of dried milk are stocked. They are also able to obtain some of the nutrient preparations for children at cost price.

The total number of all issues of dried milk at the Centre, East Park Terrace, during the year was 21,036, and the weight in pounds was 31,902. The total number of issues of malt and cod liver oil was 8,677, and the weight in pounds 8,677. In addition, the following issues were made from Sydney House :— malt and cod liver oil 475, weight in pounds 488.

ORTHOPÆDIC CLINIC.

During the year under review it will be seen from the figures in the following table that the work of the Clinic has continued to increase, the total attendances being almost 3,000 more than 1934. Several general practitioners in the area, as well as the specialists on the staff of the Health Department, have availed themselves of the services of the Orthopædic Surgeon from Lord Mayor Treloar's Hospital, Alton, in conjunction with which Hospital this Clinic is run.

Suitable cases are received there as in-patients with very satisfactory results, and splints, calipers, surgical boots, and other appliances have been supplied from Alton or from local contractors during the year 1935.

The accommodation provided in the present premises is inadequate for the successful treatment by the Masseuse of the many cases attending for Remedial exercises. With the provision of increased space and the full-time services of the Masseuse, instead of her attendance on five sessions per week as at present, the Department would be better able to cope with the large amount of remedial work needing attention, especially amongst school children.

The attendance of several cases requiring electrical treatment renders the provision of new electrical apparatus a matter of importance, and it is hoped that the proposed installation of new apparatus will add to the efficiency of the Department. In the past several cases have been obliged to forego the necessary special treatment, or to obtain it elsewhere, owing to the inadequacy of our electrical equipment.

The decline in the number of new county cases seen is due to the fact that, during part of 1935, several of these were sent to County Clinics at Eastleigh, Christchurch, etc., instead of coming into Southampton as in previous years.

The following cases were treated during the year :—

Congenital deformities—

Club Foot	16
Dislocation of Hip	5
Other forms	15
Spinal Malformation	5
Torticollis	13
Effect of old injuries	7
Hallux Valgus	4
Hammer Toes	4
Muscular Dystrophy	2
No abnormality detected	7
Other Deformities of Foot	17
Osteomyelitis	2

Paralysis—	
Congenital Spastic	15
Infantile	27
Other forms	3
Pes Cavus	6
Pes Planus—	
Simple	128
With Valgus	18
Plantar Warts	2
Pseudocoxalgia	2
Rickets with Deformity—	
Genu Valgum	18
Other forms	17
Rheumatoid Arthritis	1
Schlatter's Disease	1
Spinal Deformities—	
Kyphosis	47
Kyphosis with Pes Planus	8
Kypho-scoliosis	40
Kypho-scoliosis with Pes Planus	7
Scoliosis	52
Scoliosis with Pes Planus	5
Sprains and other Joint injuries—	12
Tuberculosis—	
Hip	18
Lower Limb	10
Upper Limb	3
Spine	9
Various other conditions	5

Table showing attendances of patients during the year 1935:

Classification.	Attendances of Patients.							
	Under School Age.		School Age.		Over School Age.		Total.	
	New.	Old.	New.	Old.	New.	Old.	New.	Old.
Tuberculosis of—								
Spine	1	0	0	18	1	8	2	26
Hip	1	1	5	28	0	3	6	32
Other Joints ...	0	0	3	22	0	73	3	95
Other Crippling Diseases—								
Spine	1	15	80	3645	4	25	85	3685
Feet and other Cases ...	40	265	147	2501	3	67	190	2833
Rickets	7	23	1	4	0	0	8	27
Total ...	50	304	236	6218	8	176	294	6698
Cases from the County of Hampshire ...	...	...	...	...	...	...	12	62
							306	6760

DISPENSING.

The following are the particulars of the number of individual persons for whom medicines, etc., were dispensed in connection with the various Clinics during the year :—

Maternity and Child Welfare	7,647
Orthopædic	4
Tuberculosis	4,086
Venereal Diseases	269
School Medical	4,019
Total ...	16,025

HEALTH WEEK.

This year a Health Week was held in Southampton from 18th to 23rd November. Sir Francis Fremantle, Member of Parliament for St. Albans, officially opened the Exhibition. The opening ceremony was well attended, and Sir Francis Fremantle said that he hoped the Exhibition would make people realise that prevention of illness was better than curing a disease. He referred briefly to Immunisation against Diphtheria, Slum Clearance, etc.

The Exhibition consisted of exhibits in the Coliseum, public lectures and demonstrations in the Victoria Rooms throughout the week.

As a Health Department, we had our own stand in the Exhibition. By means of suitably dressed models kindly lent by Messrs. J. Baker & Son, Tyrrell & Green, and Edwin Jones & Co., and to whom our thanks are given, we were able to portray an Immunisation Clinic. A male model represented the doctor; clothed in a white coat, just about to carry out an actual immunisation of two children. A table with the necessary syringes and needles showed the apparatus employed. Health Visitors were on duty throughout the day, and to a large and interested crowd that congregated around the stand, they were able to explain the procedure of immunisation against Diphtheria, and it is to be hoped that many people will apply for free immunisation as a result of seeing and hearing all about it.

Next to this stand, the general work of the Health Department was shown in a pictorial fashion. There was a sanitary inspector on duty, who was ready to answer any enquiry as regards the exhibits, among which could be seen the result of slum clearance and rehousing. Photographs were shown of "clearance areas" before and after the schemes were carried out. Adjacent to these photographs could be seen pieces of wood that afforded suitable harbourage for the bed bug, and sealed in two petri dishes were male and female cimex lenticularis. At the back of the stall were charts showing the life cycle of the bed bug and other parasites. Models of rats and mice were on show, together with notes concerning the damage that rats are capable of doing; and also the ways and means of getting rid of these pests were explained.

A microscope was available to demonstrate sections of interest, including the diphtheria bacilli.

The work of the Food Inspector was demonstrated and explained. One was able to learn the difference between butter and margarine ; a pig's pluck was on view, showing the pathological condition of infection with tuberculosis.

Adjoining them was a representation of a Child Welfare Clinic ; the doctor with a stethescope hanging loosely on her shoulders, the mother and nurse, were all represented by models, whilst a baby lay in a cot, presumably over whom a consultation was being held. A Health Visitor was on duty explaining the work of the Clinic, and many people were amazed at the ingenuity that had been displayed in making a baby's cradle from a banana crate.

Questions asked by those who were interested, show that the public are concerned in the correct feeding of children, and many were interested in the new type of feeding bottle now recommended by those who are dealing with this kind of work.

Mention must be made at this time of the display of the National Council of Maternity and Child Welfare. It was unfortunate that this stand was not nearer the Health Department Tableaux, because the food for daily diet was displayed in wax models from age 1 month to 5 years—together with an explanation of the advantages of each type of food.

There were many other demonstrations by various manufacturing firms, but I think it unwise to single out any particular exhibit of these firms.

The various large societies who interest themselves in Public Health matters had stands, and in many instances a speaker representing the Society and one of the Council's Medical Officers spoke at a public lecture.

The following Public Meetings were held :—

Society.	Title of Lecture.	Speaker.	
		A.	B.
National Council for Child Welfare.	Infant Management.	Miss Keating.	Dr. Bunting.
Ditto	The Teaching of Mothercraft in Schools.	Miss Dixon.	
National Association for the Prevention of Tuberculosis.	The Prevention of Tuberculosis.	Dr. Harley Williams.	Dr. Beck.
National Smoke Abatement Society.	Noise Abatement and Smoke Abatement.	Prof. Cave-Browne-Cave. Dr. Vœux.	
British Social Hygiene Council.	Tragedy of Ignorance.	Capt. F. Buckler.	Dr. Campbell.
The Eugenics Society.	Health and the Race.	Miss Hilda Pocock.	
—	Diphtheria Immunisation.	Dr. Bousfield.	

A—Name of Speaker at Meeting.
B—Name of Member of Health Department who also spoke.

There were other lectures and demonstrations by means of cinematograph, etc., organised and directed by the owners and representatives who had taken stalls, and much useful information and advice was given.

It is to be hoped that prevention of ill health by means of propaganda will lead in the near future to persons becoming more interested and willing to co-operate in the public health work. For the object of the Exhibition was to bring home to the general public some of the objects of public health work, which in itself is preventive medicine, as practised and inspired by Sir George Newman during his term of office as Chief Medical Officer of the Ministry of Health.

The number of persons who attended the Exhibition was :—

General Public	10,065
Conducted Parties	2,760
Lecture Hall (evenings only)	2,042
Total ...	14,867

Further, it is to be hoped that, as a result of these large attendances, the work of the various special Clinics will increase, as this is the only guide available for estimating whether such expenditure on " Health Week " can be justified.

Notifiable Infectious Diseases.

THE INCIDENCE OF NOTIFIABLE INFECTIOUS DISEASES.

The following is a total of the notifications received during the year, also the rate per 1,000 of the population :—

	Notified.	Rate per 1000 of Population.	England and Wales.
Small Pox	0	0.00	0.00
Diphtheria	787	4.44	1.60
Erysipelas	64	0.36	0.42
Scarlet Fever	357	2.02	2.96
Enteric Fever and Para-Typhoid Fever	13	0.07	0.04
*Puerperal Fever	6	2.14	3.60
*Puerperal Pyrexia	22	7.85	9.44
Cerebro-Spinal Fever	2	0.01	—
Encephalitis Lethargica	0	0.00	—
*Ophthalmia Neonatorum ...	38	14.09	—
Pulmonary Tuberculosis	388	2.13	—
Other Forms of Tuberculosis ...	31	0.17	—
Pneumonia	64	0.36	—
Malaria	0	0.00	—
Poliomyelitis	0	0.00	—
Dysentery	0	0.00	—
	1,772		

*The rate for Puerperal Fever and Puerperal Pyrexia is calculated on the number of live births and still births registered, and Ophthalmia Neonatorum on live births registered.

The death-rate from diseases usually classified as the chief epidemic diseases, namely : Small Pox, Scarlet Fever, Diphtheria, Enteric Fever, Measles, Whooping Cough, and Diarrhœa, and Enteritis among children under two years of age, amounted to 0.339 per 1,000 of the population.

The death-rate per 1,000 of the population from the diseases specified above for the past five years is shown in the following table :—

	1931	1932	1933	1934	1935
Small Pox	.000	.000	.000	.000	.000
Scarlet Fever	.006	.000	.006	.006	.011
Diphtheria	.069	.011	.051	.119	.203
Enteric Fever	.000	.000	.000	.006	.006
Measles	.006	.079	.034	.051	.017
Whooping Cough ...	.080	.073	.039	.085	.034
Diarrhœa and Enteritis under 2 years of age...	.069	.085	.045	.045	.068
Total Zymotic Death-rate	.230	.248	.175	.312	.339

The following table shows the number of notifications received of Infectious Diseases, which have been classified in age groups and Municipal Wards.

CASES OF INFECTIOUS DISEASES NOTIFIED DURING THE YEAR, CLASSIFIED IN AGES AND LOCALITIES.

Disease.	Number of Cases notified.								Total Cases Notified in each Municipal Ward.																	Institutions.
	At Ages—Years.																									
	At all Ages.	Under 1 year.	1 & under 5 years.	5 & under 15 years.	15 & under 25 years.	25 & under 45 years.	45 & under 65 years.	65 and upwards.	Town.	St. Mary's.	Northam.	Trinity.	Newtown.	All Saints.	Bevois.	Banister.	Freemantle.	Millbrook.	Shirley.	Portswood.	St. Denys.	Bitterne & Pear Tree.	Bitterne & Sholing.	Woolston.	St. Nicholas.	
Small-pox	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Scarlet Fever ...	357	2	93	211	28	19	4	..	18	16	31	9	16	5	10	7	12	19	41	16	9	54	34	18	35	7
Diphtheria ...	787	17	196	400	81	76	15	2	71	66	67	35	26	9	22	14	19	36	161	21	17	79	40	26	38	40
Enteric Fever ...	13	..	..	3	2	5	3	..	1	3	..	..	..	..	2	..	..	..	5	1	..	1	..	..	..	..
Puerperal Fever ...	6	..	..	..	3	3	..	..	..	..	..	..	1	..	1	..	..	..	..	..	..	1	2	..	1	..
Puerperal Pyrexia ...	22	..	..	..	6	16	..	..	2	1	2	3	1	1	..	1	..	..	1	..	1	2	1	..	1	5
Erysipelas ...	64	1	1	1	4	18	27	12	..	2	1	5	3	4	..	3	2	6	8	4	1	4	2	1	2	16
Cerebro-Spinal Fever	2	..	..	2	..	..	..	..	..	..	..	..	..	..	..	1	..	..	..	..	..	..	..	..	1	..
Acute Poliomyelitis...	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Encephalitis Lethargica	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Ophthalmia Neonatorum	38	38	..	..	..	..	..	..	5	5	4	4	2	2	..	..	1	3	2	..	1	4	1	2	..	2
Dysentery ...	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Malaria	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..	..
Pneumonia ...	64	1	9	7	9	15	15	8	3	3	4	2	2	2	2	2	..	4	2	4	3	5	6	2	2	16
Pulmonary Tuberculosis	388	..	3	92	87	147	51	8	23	22	15	16	18	20	14	10	24	39	37	13	16	31	27	18	44	1
Other Forms of Tuberculosis ...	31	..	5	12	7	5	2	..	5	1	4	3	..	2	..	1	..	1	1	3	..	2	4	..	4	..
Totals ...	1772	59	307	728	227	304	117	30	128	119	128	77	69	45	51	39	58	108	258	62	48	183	117	67	128	87

The following table shows the number of cases of notifiable disease recorded in the Borough during the past five years :—

Disease.	1931.	1932.	1933.	1934.	1935.
Small Pox	—	—	—	—	—
Scarlet Fever	185	153	469	582	357
Diphtheria	215	212	286	741	787
Enteric Fever	8	9	6	5	13
Puerperal Fever	11	14	14	9	6
Puerperal Pyrexia	31	32	17	30	22
Erysipelas	58	58	74	73	64
Cerebro-Spinal Fever	2	8	8	3	2
Poliomyelitis	2	2	5	6	—
Ophthalmia Neonatorum	37	30	35	23	38
Pulmonary Tuberculosis	299	325	232	618	388
Other Forms of Tuberculosis ...	31	45	46	36	31
Encephalitis Lethargica	3	5	2	2	—
Pneumonia	89	114	112	83	64
Malaria	—	1	—	—	—
Dysentery	—	—	1	1	—
Totals	971	1,008	1,307	2,212	1,772

Ophthalmia Neonatorum was made compulsorily notifiable on 1st April, 1914 ; Encephalitis Lethargica on the 1st January, 1919; Pneumonia, Malaria and Dysentery on 1st March, 1919, and Puerperal Pyrexia on the 1st October, 1926.

There were 1,185 visits and re-visits made to houses in which infectious diseases occurred, and inquiries were made relative to the probable source of infection, and the isolation of the patient. Information was also given concerning the precautions necessary to be taken to prevent the spread of disease, and in the case of Measles advice as to treatment and nursing of patients where a medical man was not in attendance.

Of the cases among residents of the Borough notified under the various Acts and Regulations, 1,079 were removed to the Isolation Hospital for treatment.

Sanitary defects were found in 47 houses in which cases occurred.

SMALL POX.

No case of Small Pox was notified in the Borough during the year.

SCARLET FEVER.

The number of cases of Scarlet Fever notified during the year amounted to 357.

This number shows a considerable decrease in the cases notified when compared with that for the year 1934, when 582 cases were notified, the decrease being 225. It is also a decrease of 112 when compared with those notified in the year 1933.

The greatest number was notified in the first three months of the year with an average of 8 cases per week, and in the latter three months with an average of 10.2 per week; the average per week for the period April to September being 4.6.

The rate per 1,000 of the population in Southampton was 3.28, and for England and Wales 2.96.

Two deaths occurred among cases notified during the year, one male aged 4 years, and a male aged 24 years.

The cases as in the previous year were generally spread over the Borough, the greatest number being notified from the Shirley, Bitterne and Pear Tree, Bitterne and Sholing and St. Nicholas Wards, whilst the smallest number were notified from the Trinity, All Saints, Banister and St. Deny's Wards.

The number of cases notified and deaths resulting from the disease for the past five years were:—

	Cases.	Deaths.	Percentage.
1931	185	1	0.54
1932	153	0	0.00
1933	469	1	0.21
1934	582	1	0.17
1935	357	2	0.56

One hundred and seventy-two of the cases notified among residents of the Borough were removed to the Isolation Hospital, which is equal to a percentage of 48.2 compared with 70.4 in 1934 and 83.2 in 1933.

In addition to the cases admitted to the Isolation Hospital from the Borough, 24 from neighbouring districts, and ten from the Port were admitted for treatment.

The following table gives particulars of cases of Scarlet Fever notified in the Borough, showing the number treated in the Isolation Hospital, the period of detention and the number of "return" cases during the past six years:—

Year.	Cases notified.	Admitted to Hospital.	Average period in Hospital (days).	No. of "return" cases.	Cases treated at home.
1930 ...	345	263	33.0	2	82
1931 ...	185	144	32.0	0	41
1932 ...	153	122	34.3	1	31
1933 ...	469	390	33.8	1	79
1934 ...	582	410	31.8	1	172
1935 ...	357	172	37.8	3	189

DIPHTHERIA.

The epidemic of Diphtheria which existed during the latter part of the year 1934 continued unabated until March of this year, after which the cases dropped to about normal. During the first three months of the year, 391 cases were notified, an average of 30.1 per week. During the five months April to August, 159 cases were notified, an average of 7.2 per week and for the period September to December, there was a slight increase, the notifications totalling 237, with an average of 13.9 cases per week. The total number notified during the year was 787, giving a case rate per 1,000 of the population of 4.44. The rate for England and Wales was 1.60.

The case rate per 1,000 of the population in the Municipal Wards was :—

Town	7.47	Millbrook ...	2.64
St. Mary's ...	6.67	Shirley	8.68
Northam	7.26	Portswood ...	1.79
Trinity	4.55	St. Denys ...	1.74
Newtown... ...	3.85	Bitterne & Pear Tree	6.73
All Saints ...	1.15	Bitterne & Sholing	2.89
Bevois	3.01	Woolston... ...	3.31
Banister	1.58	St. Nicholas ...	2.53
Freemantle ...	2.70	Borough	4.44

Thirty-six deaths occurred from the disease, giving a case mortality of 4.57.

The number of cases notified and deaths recorded during the past five years are shown in the following Table :—

	Cases.	Deaths.	Percentage.
1931	215	12	5.58
1932	212	2	0.94
1933	286	9	3.15
1934	741	21	2.83
1935	787	36	4.57

Six hundred and seventy-seven of the cases notified amongst residents of the Borough were admitted to the Isolation Hospital for treatment, which is equal to a percentage of 85.9, compared with 87.9 in 1934, and 90.6 in 1933.

In addition to the number specified above, seven cases were admitted to the Isolation Hospital from the Port, 20 from neighbouring districts, and thirteen military cases.

DIPHTHERIA IMMUNISATION.

The methods adopted on the institution of our scheme were outlined in the Report for 1934, on pp. 82–83.

The epidemic which prevailed at the end of 1934 and the early months of 1935, focussed the attention of parents and others on this service, and in view of the number of requests received, we decided to distribute forms to all children attending the schools in the Borough.

The response to this procedure was overwhelming, and arrangements were made for all Medical Officers who could be spared to assist in the work of immunisation. Many schools were visited, and sessions were held at the Clinics or Welfares on each day of the week. It was appreciated that this could have little effect in preventing the immediate spread of the disease, but it presented a golden opportunity of protecting the child population of the town, and, had the epidemic continued, the percentage of susceptible children would rapidly have diminished as the protective injections took effect.

During the year we treated either wholly or partially 9,342 children : 12,790 visits were made to the Clinics by these children, while the Medical Officers paid numerous visits to the schools in connection with this work.

Owing to the difficulty of obtaining sufficient supplies of the Toxoid Anti-toxin Floccules, a number of the children received either T.A.M. or Alum Precipitated Toxoid. The technique employed in the administration of the T.A.F. and T.A.M. was that described in the last Report.

The Alum Precipitated Toxoid, supplied by Messrs. Park Davis & Co., was given in $\frac{1}{2}$-c.c. doses, injected intramuscularly into either the deltoid or thigh, although generally, with the children of school age, the deltoid was the site of injection chosen. One injection only was given of this preparation in place of three with the T.A.F. and T.A.M. antigens.

The following table gives details of the work carried out to the 31st December, 1935, and the totals to that date :—

	1935.	Total of all years up to end of 1935.
The number of children who have received :—		
A course of T.A.F. with final Schick negative ...	4693*	4927
A course of A.P.T. with final Schick negative ...	821	821
(* 947 incomplete at end 1934 were completed in 1935.)		
A course of T.A.F. with final Schick positive ...	69	69
A course of A.P.T. with final Schick positive ...	89	89
Primary Schick test only with negative result ...	—	243
Primary Schick test only with positive result ...	8†	8
(† Refused further treatment.)		

In addition, the following children who received partial protection were awaiting completion at the end of 1935 :—

One injection of Alum and awaiting Schick test ...	525	
One injection of T.A.F.	114	
Two injections of T.A.F.	172	
Three injections of T.A.F. and awaiting Schick test	2660	
	——	3471

The children shown below refused to complete treatment after reaching the stages shown :—

One injection of T.A.F.	126	
Two injections of T.A.F.	174	
Three injections of T.A.F.	760	
One injection of A.P.T.	60	
Other reasons	29	
	——	1149

Thus, during 1935, the 9,342 children dealt with received approximately 25,000 injections, and nearly 6,000 Schick tests were performed.

It will be noticed that of 5,906 final Schick tests performed after the immunising course, only 158, or 2.67%, were positive. We may thus premise that approximately 9,800 children in the Borough are now immune from Diphtheria. The child population of the Borough at the 31st March, 1936, under the age of 16 years, was 44,239 ; 9,800 represents 22.1% of the children.

Notifications of Diphtheria subsequent to Immunisation.

A.—Since the inception of immunisation 14 cases have been notified as suffering from Diphtheria subsequent to their Schick test having been found negative.

(1) Of these, three cases had been subjected to a Schick test only, two showed no clinical signs whatever, but had been in contact with Diphtheria and swabs prior to admission to Hospital were found to contain Diphtheria bacilli. All subsequent swabs were negative. The other child in this group suffered from mild nasal Diphtheria, a swab before admission to Hospital being positive for Diphtheria bacilli, and all subsequent swabs being negative

(2) Eight children, subsequently notified as suffering from Diphtheria, had received immunising injections of T.A.F. followed by a negative Schick test. Three of these were contacts, who were admitted to Hospital with positive swabs, all swabs afterwards being found negative. One child was a carrier who showed no clinical signs of Diphtheria, and the four others showed mild clinical Diphtheria, bacteriologically confirmed, and resulting in no complications.

(3) Three children were notified as suffering from Diphtheria subsequent to immunisation by A.P.T., followed by negative Schick test. Two of these were contacts showing no clinical signs, but with positive swabs before admission to Hospital. In one instance all subsequent swabs were negative, in the other the Diphtheria bacillus was more persistent. The other child in this group suffered from a discharging ear, from which persistent positive swabs were obtained. This child showed no other clinical evidence of Diphtheria.

In addition to the preceding children, there have been a number subsequently notified as suffering from Diphtheria who have had a full course of either T.A.F. or A.P.T., and who have not had a subsequent Schick test to confirm the establishment of immunity. The following are particulars of these children :—

B.—Seventeen had received a full course of T.A.F. ; of these, ten showed definite clinical signs, but only one to a severe degree. In this case the disease occurred seven months after the last injection.

Seven children showed no clinical signs whatever, and ten of the seventeen cases had positive swabs only before admission to Hospital. All subsequent swabs proved to be negative.

C.—Twelve children were notified to be suffering from Diphtheria after an injection of A.P.T., but a Schick test had not later been carried out on these children. Eight showed definite clinical signs of Diphtheria ; one of these cases occurred within a few days of inoculation, before any immunity could have been established. Two severe cases occurred at seven months and eleven months subsequent to the protective inoculations. Five cases were mild in character. In the other four instances in this group there were no clinical signs of Diphtheria. In five of the twelve cases occurring subsequent to the A.P.T. injections, a positive swab was obtained only before admission, all subsequent swabs proving to be negative.

ENTERIC FEVER.

The number of cases of Enteric Fever notified in the Borough during the year was 13, including five cases of Para-Typhoid. Ten of the cases notified were admitted to the Isolation Hospital for treatment, two were admitted to the Borough Hospital, and one was treated at home. Three cases were admitted for observation.

Six cases were admitted to the Isolation Hospital from the Port, and one suspected case to the Borough Hospital.

One death occurred from the disease recorded among cases notified in the Borough.

The number of cases notified, and the deaths that occurred amongst cases notified in the Borough for the past five years are given in the following table :—

	Cases.	Deaths.	Percentage of Deaths amongst cases notified in the Borough.
1931	8	0	0.0
1932	9	0	0.0
1933	6	0	0.0
1934	5	1	20.0
1935	13	1	7.7

INFLUENZA AND PNEUMONIA.

The Borough was comparatively free from Influenza during the year, only 14 deaths being recorded. The number of deaths is the same as that for the year 1934, but in 1933, 50 deaths from this cause were recorded.

The deaths from all forms of Pneumonia totalled 117, which compares favourably with 138 in 1934, and 172 in 1933.

The notifications received of cases of Pneumonia were 64 compared with 83 in 1934 and 112 in 1933.

CEREBRO-SPINAL FEVER.

Two cases of Cerebro-Spinal Fever were notified during the year, which proved fatal.

Venereal Diseases.

VENEREAL DISEASES.

The following is a summary of the work carried out during the year 1935 at each of the Clinics provided by the Local Authority for the treatment of Venereal Diseases :—

Number of new cases dealt with for the first time during the year suffering from—

	Males.	Females and Children.	Total.
Syphilis (all stages)	80	58	138
Soft Chancre	7	—	7
Gonorrhœa	297	51	348
	384	109	493
Conditions other than Venereal	170	81	251
Total attendances of all persons at the out-patient Clinic during 1935	30,975	6,317	37,292
Total number of in-patients admitted for treatment during 1935...	67	49	116
Aggregate number of in-patient days of treatment given to persons	4,029	2,280	6,309

The number of new cases treated show the following decreases when compared with the previous year, viz. :—Syphilis : males 40, females 17 ; Gonorrhœa : males 14, females 19 ; conditions other than Venereal, 32. The attendance at the out-patient Clinics was 37,292, compared with 35,414 in 1934.

The in-patient treatment also showed a decrease of 31, and the in-patient days 2,289.

As in the two previous years, out-patient treatment for persons suffering from Venereal Diseases has been provided in the up-to-date Clinics at East Park Terrace, while appropriate wards have been available in the Borough Hospital for cases requiring in-patient treatment.

In this, the third year of the re-organised scheme, it is interesting to make a comparison of figures :—

NEW CASES.

1932.	Males.	Females and Children.	Total.
Syphilis (all stages) ...	89	25	114
Soft Chancre	5	—	5
Gonorrhœa	203	25	228
Non-Venereal Diseases ...	36	95	131
			478

Total attendances, 13,632.

1933.			
Syphilis (all stages) ...	113	65	178
Soft Chancre	2	—	2
Gonorrhœa	279	53	332
Non-Venereal Diseases ...	116	87	203
			715

Total attendances, 24,963.

1934.			
Syphilis (all stages) ...	120	75	195
Soft Chancre	3	—	3
Gonorrhœa	311	70	381
Non-Venereal Diseases ...	178	105	283
			862

Total attendance, 35,414.

1935.			
Syphilis (all stages) ...	80	58	138
Soft Chancre	7	—	7
Gonorrhœa	297	51	348
Non-Venereal Diseases ...	170	81	251
			744

Total attendances, 37,292.

From the foregoing tables it may be seen that there was an appreciable drop in the number of new patients during 1935, the greatest decrease being amongst syphilitics. On the other hand, the number of attendances throughout the year again shows an increase, as a result of greater appreciation on the part of the patients concerned of the grave necessity for carrying out the instructions given by the Medical Officers. Such a response is

bound to react very favourably on the community at large, for it is only by a very high standard of treatment and cure that such a scourge as Venereal Disease can ever be eliminated.

Sources of Patients.

As in previous years, the support and co-operation of all branches of the medical community have been a marked feature of the scheme. While large numbers of patients reported voluntarily at the Clinic, nearly 40 per cent. of the total have been referred by other Doctors or Hospitals. The General Practitioners have again availed themselves of all the facilities offered, and, where necessary, have given their whole-hearted support in attacking the numerous difficulties arising. The honorary staffs of the Voluntary Hospitals have referred a great many cases, and, where necessary, have continued to advise throughout the subsequent treatment on matters particularly associated with their aspect of the work. Complete co-operation between the Venereal Diseases Department and the other branches of the Public Health Services have again brought to light many cases of latent Venereal Disease, which might otherwise have been overlooked until some dramatic circumstances arose, indicating the gravity of the underlying condition. Particularly in connection with the Maternity and Child Welfare Department have such results been most gratifying.

The Shipping Companies, and in particular the Ships' Surgeons, have continued in their whole-hearted support, with the result that there must be very few cases of concealed disease amongst seamen nowadays, especially since the risk of loss of employment has been almost completely eradicated.

Types of Disease.

Syphilis was remarkable for the fact that only 13 primary cases were seen throughout the year. In the three previous years the corresponding figures for primary cases were 44, 37 and 15, so that the apparent diminution in fresh infection remarked upon in last year's Report has been maintained, and it is interesting to know that this is happening in every other Clinic in the country —a further example of the excellent results from the Venereal Diseases Regulations of 1916.

Chancroid, with 7 cases, showed a certain increase, although these figures are comparatively small for a seagoing community.

Gonorrhœa showed a certain diminution, although not so marked as in the case of Syphilis.

Non-Venereal Diseases showed similar figures in the males, but quite an appreciable drop in the females, the latter, no doubt, being due to the fact that in previous years many cases which were frankly gynæcological and not venereal had to attend the Clinic, whereas now the newly established Gynæcological Department receives such patients direct.

Ophthalmia Neonatorum is one of the most preventable of all venereal infections, if the Ministry of Health Regulations and Venereal Diseases Schemes are adequately carried out. This disease still shows figures of 38. Certainly in only a few instances has Gonorrhœa been the underlying cause, the remaining cases coming under the heading of "Catarrh up to the third week" Most of the treatment for this condition has, as on previous occasions, been carried out by the Free Eye Hospital.

Vulvo-Vaginitis, another very preventable manifestation in children, has certainly been a rarity during the year, only two such cases being found. In both instances immediate removal to hospital and prolonged treatment have effected a cure.

Sources of Infection.

On the male side there are two very distinct groups whence infection arises. Some 40 per cent. are the result of infection at foreign ports, of which Cape Town and the other South African ports provide the largest proportion. It is with very great regret, however, that we have again to record that over 40 per cent. of initial infections arose in our own town, and of these the prostitute has provided a very large number.

Review of Attendances and Follow-up Work.

When it is recalled that after the first few weeks of an early infection the average patient suffers very little personal inconvenience and practically no interference with work or pleasure, it will be understood how difficult it is to persuade patients to attend for treatment for the long periods, which experience has taught us to be essential before a complete cure can be expected.

The defaulter rate in the town has been comparatively low. In the case of Syphilis, 62 out of 441, or 14 per cent., of cases ceased to attend, while amongst the Gonorrhœa cases 136 out of 711, or 19 per cent., defaulted. Compared with other Clinics, these results are probably quite good, but from such a nucleus of infected cases arises a great danger to the community at large each year.

Every possible administrative measure allowed by the present law has been utilised to persuade these people to return and complete the treatment advised. On the male side contact is

extraordinarily difficult, and tactful letters at present are the only means of approach. On the female side further excellent work has been done by the Health Visitors, who, by tactful visits, have persuaded a large number to return.

In view of the figures such as these returned each year from every Venereal Diseases centre in the country, it is a cause for grave regret that the Medical Officer of Health is not empowered to take more forceful steps to obtain safety for the community.

We would again record our gratitude for the help given in female cases by the Female Probation Officers. In the tackling of such a social menace, there is a great need for the establishment of hostels to allow of young women and children being cared for while treatment is necessary, as so many are unable to avail themselves of treatment for fear of losing their homes or their employment.

The gravity of the prostitute class in the town has been referred to above, and figures have been submitted to the Chief Constable, but, with the inadequacy of the law as it stands at present, an adequate attack on this class has proved impossible.

Treatment.

Similar types of treatment have been continued in 1935, as in the preceding years, with Arsenic, Bismuth, and Mercury, the three outstanding drugs. Many other preparations claiming equally good results have been tried, and the more promising will be persevered with in the future.

The cases of Neuro-Syphilis, which were again numerous, have nearly all responded well to Tryparsamide and Malaria treatment, and such cases, which in previous years would have been doomed to perpetual hospitalisation, are now, in a great number of instances, able to resume partial, if not complete, contact with the world.

Gonorrhœa is still without any specific therapy, but the combined forces at our disposal are making for rapid cure, and it is with particular satisfaction that we record that no cases, discharged as cured during the two preceding years, have relapsed.

Dental Treatment.

The service of the Dental Clinic has been placed at the disposal of patients attending this Clinic on the recommendation of the medical officer, and during the year dental treatment was given in 31 cases.

Statistical tables as required by the Ministry of Health (Venereal Diseases) Regulations are appended.

	Syphilis.		Soft Chancre.		Gonorrhœa.		Conditions other than venereal.		Totals.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Totals.
1. Number of cases on 1st January under treatment or observation	165	138	3	...	285	78	53	26	506	242	748
2. Number of cases removed from the register during any previous year which returned during the year under report for treatment or observation of the same infection	7	5	...	...	9	1	...	...	16	6	22
3. Number of cases dealt with for the first time during the year under report (exclusive of cases under Item 4) suffering from :—											
Syphilis, primary	13	...	...	...	...	...	...	...	13	...	13
,, secondary	6	4	...	...	...	...	...	...	6	4	10
,, latent in 1st year of infection ...	2	5	...	...	...	...	...	...	2	5	7
,, all later stages	49	27	...	...	...	...	...	...	49	27	76
,, congenital	10	22	...	...	...	...	...	...	10	22	32
Soft Chancre	...	...	7	...	...	...	...	...	7	...	7
Gonorrhœa, 1st year of infection	...	...	...	...	263	45	...	...	263	45	308
,, later	...	...	...	...	34	6	...	...	34	6	40
Conditions other than venereal	...	...	...	...	...	...	170	81	170	81	251
4. Number of cases dealt with for the first time during the year under report known to have received treatment at other Centres for the same infection	23	2	...	...	36	2	...	...	59	4	63
Totals of Items 1, 2, 3, and 4 ...	275	203	10	...	627	132	223	107	1135	442	1577
5. Number of cases discharged after completion of treatment and final tests of cure	9	7	5	...	143	34	179	84	336	125	461
6. Number of cases which ceased to attend before completion of treatment and were, on first attendance, suffering from :—											
Syphilis, primary	7	...	...	...	...	...	...	...	7	...	7
,, secondary	4	1	...	...	...	...	...	...	4	1	5
,, latent in 1st year of infection ...	...	...	...	...	...	...	...	...	...	...	...
,, all later stages	32	7	...	...	...	...	...	...	32	7	39
,, congenital	7	4	...	...	...	...	...	...	7	4	11
Soft Chancre	...	...	...	...	...	...	...	...	...	...	...
Gonorrhœa, 1st year of infection	...	...	...	...	104	19	...	...	104	19	123
,, later	...	...	...	...	10	3	...	...	10	3	13
7. Number of cases which ceased to attend after completion of treatment but before final tests of cure	9	6	...	...	17	...	...	...	26	6	32
8. Number of cases transferred to other centres or to institutions, or to care of private practitioners ...	28	24	3	...	102	17	...	...	133	41	174
9. Number of cases remaining under treatment or observation on 31st December	179	154	2	...	251	59	44	23	476	236	712
Totals of Items 5, 6, 7, 8, and 9 ...	275	203	10	...	627	132	223	107	1135	442	1577

Return relating to all Persons at the Treatment Centres at East Park Terrace, Southampton.—Continued.

	Syphilis.		Soft Chancre.		Gonorrhœa.		Conditions other than venereal.		Totals.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	Totals.
10. Number of cases in the following stages of syphilis included in Item 6 which failed to complete one course of treatment :—											
Syphilis, primary	2	...	...	...	...	...	...	...	2	...	2
,, secondary	1	...	...	...	...	...	...	...	1	...	1
,, latent in 1st year of infection ...	...	...	...	...	...	...	...	...	...	...	...
,, all later stages	16	4	...	...	...	...	...	...	16	4	20
,, congenital	3	1	...	...	...	...	...	...	3	1	4
11. Number of attendances :—											
(*a*) for individual attention of the medical officers	4004	2720	26	...	6648	2045	275	476	10953	5241	16194
(*b*) for intermediate treatment, *e.g.*, irrigation, dressing	1205	70	68	...	18519	1006	230	...	20022	1076	21098
Total attendances	5209	2790	94	...	25167	3051	505	476	30975	6317	37292
12. In-patients :—											
(*a*) Total number of persons admitted for treatment during the year...	34	15	1	1	28	33	4	...	67	49	116
(*b*) Aggregate number of "in-patient days" of treatment given	2934	636	14	9	995	1635	86	...	4029	2280	6309

	Under 1 year.		1 and under 5 years.		5 and under 15 years.		15 years and over.		Totals.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
13. Number of cases of congenital syphilis in Item 3 above classified according to age periods	4	2	2	3	3	8	1	9	10	22

	Approved Arsenobenzene Compounds.	Mercury.	Bismuth.
14. Chief preparations used in treatment of syphilis :—			
(*a*) Names of preparations	Neokharsivan, Novostab, Novarsenobillon, Stabilarsan.	Hydrarg c creta. Pil. Hydrarg.	Bismostab. Quinostab.
(*b*) Total number of injections given (out-patients	3199	...	5206

16. Pathological Work :—	Microscopical.		Serum Tests.		
	For Spirochetes.	For Gonococci.	Wassermann.	Others for Syphilis.	For Gonorrhœa.
(*a*) Number of specimens examined at and by the medical officer of the treatment centre ...	68	369	...	...	...
(*b*) Number of specimens from patients attending at the centre sent for examination to an approved laboratory	...	2136	2730	...	26

Statement showing the services rendered at the Treatment Centres during the year, classified according to the areas in which the patients resided.

Name of County or County Borough (or Country in the case of persons residing elsewhere than in England and Wales).	Southampton	Hampshire	Wiltshire	Gloucester	Kent	London	Yorkshire	Hertfordshire	Suffolk	Scotland	Portsmouth	Dorset	Liverpool	Sussex	Essex	South Wales	Cheshire	Durham	Cornwall	Surrey	Channel Is.	Cambridge	Devon	Hereford	Dover	South Africa	Sweden	Total
A. Number of cases in Items 3 and 4 from each area found to be suffering from : Syphilis	134	18	...	...	...	2	...	...	...	...	...	...	2	1	...	2	...	1	1	...	...	...	...	...	...	...	2	163
Soft Chancre	5	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	...	...	7
Gonorrhœa	303	36	...	1	1	9	2	1	1	...	1	1	8	1	1	7	2	2	2	2	1	1	1	1	...	1	...	386
Conditions other than venereal ...	225	18	1	...	...	1	...	...	1	2	1	...	1	...	...	...	...	...	1	...	...	...	...	...	...	...	...	251
Total	667	73	1	1	1	12	2	1	2	2	2	1	11	2	1	9	2	3	4	2	1	2	1	1	...	1	2	807
B. Total number of attendances of all patients residing in each area ...	33765	3118	22	23	6	38	9	1	3	12	20	4	68	11	21	30	9	14	35	2	3	4	1	1	64	4	4	37292
C. Aggregate number of "in-patient days" of all patients residing in each area ...	5862	447	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	6309
D. Number of doses of approved arseno-benzene compounds given in the out-patient Clinic and in-patient Department to patients residing in each area	2695	477	...	...	...	...	...	...	...	1	...	...	10	...	...	10	...	4	2	...	...	...	...	...	...	...	...	3199

The following is a copy of the return supplied to the Ministry of Health of the work carried out at the Municipal Laboratory, which is approved under the Public Health (Venereal Diseases) Regulations, 1916.

Pathological examinations made in the Municipal Laboratory during the year 1935 relating to persons residing in the following areas :—

Nature of Test.	Number of Tests for Treatment Centre.														For Medical Practitioners.	Grand Total.
	Southampton.	Hampshire.	Wiltshire.	Sunderland.	London.	Liverpool.	Newport.	Durham.	Cornwall.	Yorkshire.	Cheshire.	Portsmouth.	Isle of Wight	Total.		
Microscopical—																
For detection of spirochetes ...	64	4	...	...	...	...	...	...	...	...	...	...	1	69	...	69
For detection of Gonococci ...	1786	233	3	1	16	3	4	3	1	3	1	...	2	2056	120	2176
Others ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Serum Tests—																
For Wassermann reactions ...	1804	125	1	1	1	2	3	1	1	...	1	1	3	1944	702	2646
Others for Syphilis	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
For Gonococcal Infection ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Cerebro-Spinal Fluid—																
Ross-Jones Test	40	1	...	...	...	...	...	...	...	...	...	...	...	41	...	41
Cell Count ...	40	1	...	...	...	...	...	...	...	...	...	...	...	41	...	41
Cultures	23	3	...	...	...	...	...	...	...	...	...	...	...	26	...	26
Other Tests not included above ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
Totals	3757	367	4	2	17	5	7	4	2	3	2	1	6	4177	822	4999

Tuberculosis and Cancer.

TUBERCULOSIS PAVILION.

The new Tuberculosis Pavilion in course of erection will provide accommodation for 36 cases. The site for this Pavilion is on high ground at the north side of the Isolation Hospital.

The Pavilion is to be of the bungalow type, and will accommodate 18 male patients and 18 female patients, 20 in single-bed wards, 16 in two eight-bed wards, the last-named being intended for patients well enough to be up and about during the daytime, and for whose use a combined dining and day room is provided, one for each sex. A central combined duty room and ward kitchen serves both wings.

Attached to the Pavilion is an Operating Room, X-ray Room, combined Dental and Consulting Room, and various service rooms for their efficient working. There are also two sanitary wings, each containing four wash basins, three w.c.s and bath, service room, housemaid's closet, and dirty linen receptacle.

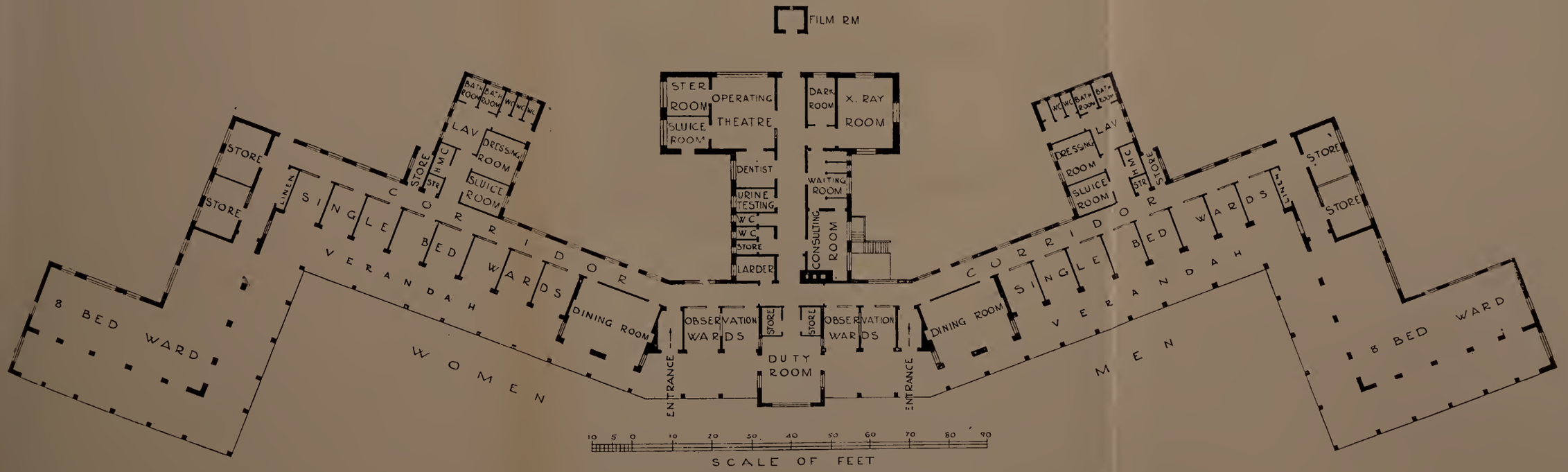
The whole of the wards front on to verandahs, to which all but four single-bed wards flanking the Duty Room can be opened to their full width by means of folding glazed doors. The wards are separated from the service corridors at their rear by means of screen walls to the height of the door, leaving an open space above, which provides light for the back of the wards. The external walls of the corridors will be provided with windows of the balanced type, and, in addition, a continuous roof window will give adequate light to the patients lying in bed.

The floors of the wards are level with that of the verandah, and wards will have access to direct sunlight at all seasons of the year, be efficiently ventilated, and free from draughts when closed.

The building will be centrally heated from the basement by means of ceiling heating panels, and hot water will be supplied to all lavatory basins and sinks.

Artificial lighting will be by electricity.

T. B. PAVILION AT THE ISOLATION HOSPITAL.



S. G. STANTON, M.I.C.E.
BOROUGH ENGINEER.

TUBERCULOSIS.

Mortality.

The mortality from Tuberculosis during the year 1935 was 161, compared with 190 in 1934. The deaths from Pulmonary Tuberculosis totalled 148, a decrease of 25 compared with the previous year. The deaths from Non-Pulmonary Tuberculosis decreased from 17 to 13.

The mortality from Pulmonary and Non-Pulmonary Tuberculosis for the last three years is shown in the following table :—

Year.	Pulmonary.	Non-Pulmonary.	Total.
1933	159 ...	26 ...	185
1934	173 ...	17 ...	190
1935	148 ...	13 ...	159

This is the lowest figure ever recorded in Southampton.

The deaths from Tuberculosis occurred in the following forms : Pulmonary, 148 ; Meningitis, 5 ; Spine, 4 ; Peritoneum, 3 ; Kidneys, 1.

This gives a death rate per 100,000 of the population from Pulmonary Tuberculosis of 83.8, and for Non-Pulmonary Tuberculosis 7.3, and for all forms of Tuberculosis 91.1.

The following are the comparative mortality figures during 1935 in Southampton and England and Wales per 100,000 of the population :—

	Southampton.			England and Wales.		
	Males.	Females.	Persons.	Males.	Females.	Persons.
Respiratory Tuberculosis	110.7	58.3	83.8 ...	72.2	49.8	60.5
Other Tuberculosis	8.1	6.6	7.3 ...	12.6	10.1	11.3

Notifications.

The number of primary notifications of Pulmonary Tuberculosis received during the year 1935 was 405. This compares very favourably with the figure 638 for 1934. In addition, 44 came to the notice of the department other than by formal notification.

The following table shows the years in which primary notifications were received of those patients who died during the year :—

1935	... ...	37	
1934	... ...	37	
1933	... ...	16	
1932	... ...	7	
1931	... ...	5	
1930	... ...	7	
1929	... ...	1	
1927	... ...	1	
1920	... ...	1	
1915	... ...	1	
Not notified	...	33	
Transferable	...	1	
Total	...	147	

The Tuberculosis Department encourages notification in the earliest and most curable stage of the disease. It is quite wrong to delay notification until tubercle bacilli appear in the sputum.

Dispensary Register.

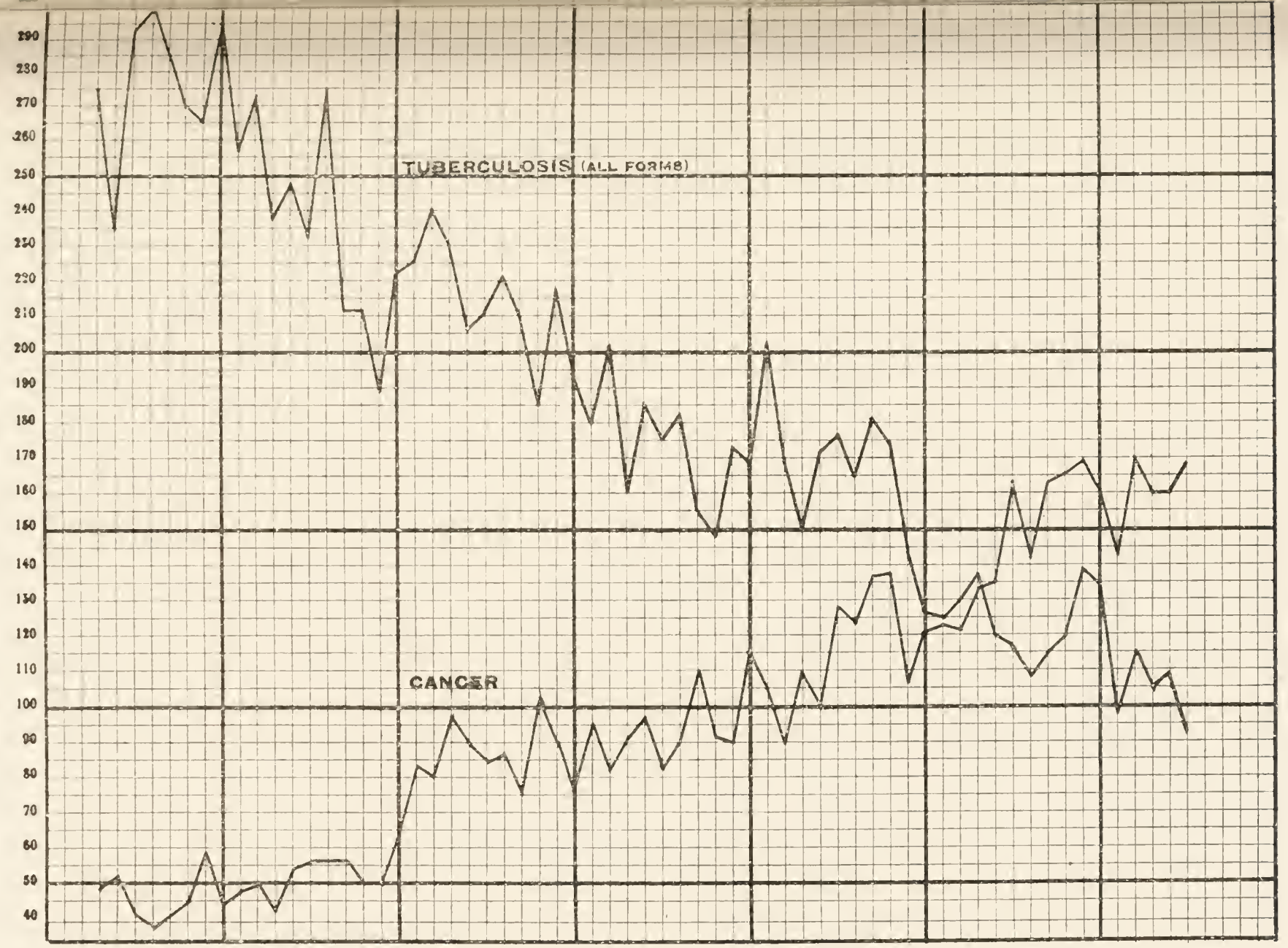
On 31st December, 1935, there were 2,430 names on the Dispensary Register. One thousand five hundred and eleven were of definitely Tuberculous patients, and 919 were those under observation, or in whom the diagnosis had not been completed.

The following table shows the distribution of these :—

	Pulmonary.				Non-Pulmonary.				Total.				Grand Total.
	Adults.		Children.		Adults.		Children.		Adults.		Children.		
	M	F	M	F	M	F	M	F	M	F	M	F	
Definite Tubercle ...	540	531	178	151	24	19	35	33	564	550	213	184	1511
Diagnosis not completed ...	...		...		...		...		239	313	180	187	919

Summary of Notifications Received under the Public Health (Tuberculosis) Regulations, 1930, during the 52 weeks ended 28th December, 1935.

Total Notifications	436
Notification of Admission to Hospital	272
Ditto Discharged...	244
	952



DEATHS PER 100,000 OF THE POPULATION FROM TUBERCULOSIS AND CANCER

IN SOUTHAMPTON 1873 TO 1935

Of the above total 419 were notifications of new cases. In addition to the above, 56 cases came to the knowledge of the Medical Officer of Health otherwise than by notification.

The localisation of the disease of the notified cases was :—

Lungs	388	Tuberculous Salpingitis	1
Cervical Glands	8	Tuberculous Peritonitis ...	2
Spine	3	Tuberculous Osteitis ...	1
Wrist	1	Abdomen	4
Tuberculous Meningitis ...	1	Rib	1
Right Kidney	2	Mesenteric Glands ...	1
Hip	6		

There were 433 sputum positive cases on the register. They were recognised as suffering from Tuberculosis in the following years :—

Previous to 1926	19	1932	46
1926	4	1933	61
1927	10	1934	101
1928	19	1935	99
1929	22		—
1930	23		433
1931	29		—

(Ministry of Health, Form T. 137.)

PUBLIC HEALTH (TUBERCULOSIS) REGULATIONS, 1930.

Part 1.—Summary of Notifications during the Period from the **1st January, 1935,** to the **31st December, 1935,** in the **Area** of the **County Borough of Southampton.**

Age Periods.	Formal Notifications. Number of Primary Notifications of new cases of Tuberculosis. 0 to 1	1 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 & up-w'rds	Total (all ages)	Total Notifications (including duplicates).
Pulmonary—													
Males ...	—	2	29	18	12	17	37	29	21	11	6	182	187
Females ...	—	1	24	21	28	30	52	29	11	8	2	206	218
Non-Pulmonary—													
Males ...	—	3	7	1	1	2	2	—	1	—	—	17	17
Females ...	—	2	3	1	3	1	2	1	1	—	—	14	14

SUPPLEMENTAL RETURN.

Part II.—New cases of Tuberculosis coming to the knowledge of the Medical Officer of Health during the above-mentioned period, otherwise than by formal notification.

Age Periods.	0 to 1	1 to 5	5 to 10	10 to 15	15 to 20	20 to 25	25 to 35	35 to 45	45 to 55	55 to 65	65 & up-w'rds	Total cases.
Pulmonary—												
Males... ...	—	1	—	—	2	1	5	2	5	7	4	27
Females ...	—	—	—	—	1	4	4	3	—	3	2	17
Non-Pulmonary—												
Males... ...	—	1	—	—	1	—	1	—	—	2	1	6
Females ...	—	—	—	2	1	—	3	—	—	—	—	6

Supplemental Return—Continued.

The source or sources from which information as to the before-mentioned cases was obtained are stated below:—

Source of Information.	No. of Cases.	
	Pulmonary.	Non-Pulmonary.
Death Returns from Local Registrars	27	10
Ditto Transferable Deaths from Registrar General	6	1
Posthumous Notifications	1	0
"Transfers" from other Areas (other than transferable deaths)	10	1
Other Sources	—	—

NOTIFICATION REGISTER.

Part III.

	Pulmonary.			Non-Pulmonary.			Total Cases.
	Males.	Females.	Total.	Males.	Females.	Total.	
Number of Cases of Tuberculosis remaining at the 31st December, 1935, on the Register of Notifications kept by the Medical Officer of Health	934	836	1770	144	137	281	2051
Number of Cases *removed* from the Register during the year by reason, *inter alia*, of:—							
1.—Withdrawal of Notification	1	1	2	—	—	—	2
2.—Recovery from the Disease	5	10	15	1	—	1	16
3.—Death	92	54	146	6	7	13	159

The Tuberculosis Dispensaries.

The Clinical Tuberculosis Officer is responsible for the clinical work at the two Dispensaries. These are situated at 1 East Park Terrace, and Sydney House, Bitterne. At the latter Clinic two sessions are held weekly, one on Monday evening and the other on Thursday morning. Sessions are held at East Park Terrace on Monday, Tuesday, Wednesday, and Friday mornings, and Thursday evening. The evening sessions are intended mainly for those whose work prevents their attendance in the day time. Tuesday morning is largely given over to the examination of children, whether new cases, contacts, or notified and observation cases. On Monday evenings the whole of the Dispensary at East Park Terrace is disinfected by means of a formalin spray.

A brief summary of the Dispensary work is shown in the following table :—

Dispensary.	New Patients.	Contacts.	Others.	Total.
East Park Terrace...	644	514	8658	9816
Sydney House ...	141	145	2351	2637
Total ...	785	659	11009	12453

Health Visitors.

Ten Health Visitors are attached to the Municipal Clinics. The Tuberculosis Department shares with the other branches of the Public Health services the services of these nurses. For obvious reasons, this is a better scheme than allocating one or two nurses for this particular branch of work.

Each week approximately ten notified cases are given to each Visitor. In the case of newly notified patients, a detailed environmental form is completed. Important information is obtained on points relating to the prevention of Tuberculosis in the houses of notified cases, and the Health Visitor is an invaluable asset in the Department's policy of keeping in personal touch with its patients.

During the year no complaint was made to the Department concerning the work of Health Visitors, which proves conclusively their tact and ability to deal with a disease about which most patients are somewhat reticent or evasive.

Health Visitors paid 7,246 visits to homes for Dispensary purposes.

TUBERCULOSIS.

New Cases and Mortality, 1935.

Including cases coming to the knowledge of the Medical Officer of Health during the year.

(Inserted by request of the Ministry of Health.)

Age Period.	New Cases.				Deaths.			
	Pulmonary.		Non-Pulmonary.		Pulmonary.		Non-Pulmonary.	
	M.	F.	M.	F.	M.	F.	M.	F.
0—1	...	...	...	...	...	1	...	...
1—5	3	1	4	2	...	...	1	...
5—10	29	24	7	3	...	...	1	...
10—15	18	21	1	3	2	...	...	1
15—20	14	29	2	4	5	4	1	2
20—25	18	34	2	1	13	16	...	...
25—35	42	56	3	5	21	11	2	3
35—45	31	32	...	1	12	11	...	...
45—55	26	11	1	1	16	5	...	...
55—65	18	11	2	...	18	4	1	...
65 and up'ds.	10	4	1	...	8	1	1	...
Totals	209	223	23	20	95	53	7	6

TUBERCULOSIS.

TABLE showing case-rates, deaths, and death-rates per 1,000 of the population from Pulmonary and Non-Pulmonary Tuberculosis in Municipal Wards during the year 1935.

Ward.	Cases.						Deaths.					
	Pulmonary.		Non-Pulmonary.		Total.		Pulmonary.		Non-Pulmonary.		Total.	
	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate	Number	Rate
1. Town ...	24	2.53	5	0.53	29	3.05	12	1.26	2	0.21	14	1.47
2. St. Mary's ...	22	2.22	1	0.10	23	2.32	6	0.61	...	...	6	0.61
3. Northam ...	15	1.63	4	0.43	19	2.06	5	0.54	...	...	5	0.54
4. Trinity ...	16	2.08	3	0.39	19	2.47	9	1.17	2	0.26	11	1.43
5. Newtown ...	18	2.31	...	...	18	2.31	3	0.38	1	0.13	4	0.51
6. All Saints ...	20	2.55	2	0.26	22	2.81	8	1.02	...	...	8	1.02
7. Bevois ...	14	1.92	...	...	14	1.92	10	1.37	2	0.27	12	1.64
8. Banister ...	10	1.13	1	0.11	11	1.24	4	0.45	1	0.11	5	0.56
9. Freemantle ...	24	3.41	...	...	24	3.41	7	0.99	...	...	7	0.99
10. Millbrook ...	39	2.86	1	0.07	40	2.93	16	1.17	1	0.07	17	1.25
11. Shirley ...	37	1.99	1	0.05	38	2.05	12	0.65	2	0.11	14	0.75
12. Portswood ...	13	1.11	3	0.26	16	1.37	7	0.60	...	...	7	0.60
13. St. Denys ...	16	1.64	...	...	16	1.64	8	0.82	1	0.10	9	0.92
14. Bitterne and Pear Tree ...	31	2.64	2	0.17	33	2.82	9	0.77	...	...	9	0.77
15. Bitterne and Sholing ...	27	1.95	4	0.29	31	2.24	14	1.01	...	...	14	1.01
16. Woolston ...	18	2.29	...	...	18	2.29	7	0.89	...	...	7	0.89
17. St. Nicholas ...	44	2.93	4	0.27	48	3.20	11	0.73	1	0.07	12	0.80
Borough ...	388	2.19	31	0.12	419	2.36	148	0.84	13	0.07	161	0.91

TUBERCULOSIS.

Average case-rates and death-rates per 1,000 of the population from Tuberculosis in Municipal Wards during the ten years 1926—1935.

Ward.	Case-Rate.			Death Rate.		
	Pulmonary.	Non-Pulmonary.	Total.	Pulmonary.	Non-Pulmonary.	Total.
1. Town	3.39	0.34	3.73	1.92	0.17	2.09
2. St. Mary's	2.12	0.33	2.45	1.05	0.11	1.16
3. Northam	2.50	0.54	3.04	1.24	0.12	1.36
4. Trinity	2.34	0.37	2.71	1.10	0.24	1.34
5. Newtown	1.93	0.20	2.13	0.84	0.09	0.93
6. All Saints	2.03	0.26	2.29	0.86	0.14	1.00
7. Bevois	1.75	0.17	1.92	1.00	0.08	1.08
8. Banister	1.24	0.10	1.34	0.58	0.04	0.62
9. Freemantle	2.16	0.16	2.32	1.01	0.22	1.23
10. Millbrook	2.10	0.22	2.32	0.92	0.17	1.09
11. Shirley	1.85	0.13	1.98	0.85	0.08	0.93
12. Portswood	1.44	0.16	1.60	0.71	0.09	0.80
13. St. Denys	1.91	0.22	2.13	0.95	0.10	1.05
14. Bitterne & Pear Tree	2.07	0.20	2.27	1.03	0.09	1.12
15. Bitterne & Sholing ...	1.64	0.32	1.96	0.89	0.19	1.08
16. Woolston	1.65	0.24	1.89	0.95	0.14	1.09
17. St. Nicholas	2.04	0.25	2.29	0.99	0.14	1.13
Borough	2.04	0.25	2.29	0.99	0.14	1.13

NEW PATIENTS.

New patients are seen at any time at both Dispensary Clinics. During the year 785 new cases were examined.

This number was made up as follows :—Males, 237 ; females, 300 ; boys, 129 ; girls, 119. Total—785. About 90% of these were referred by Medical Practitioners.

A new case is examined systematically. The various parts of the body as well as the chest are examined clinically. An appointment for X-Ray is then made, and also arrangements for a sputum examination. At the conclusion of the investigation a report is furnished to the patient's medical practitioner, stating the diagnosis when possible, and suggesting disposal or treatment. In a few cases it is impossible to arrive at a diagnosis at the Dispensary, and in these instances the patient is admitted into the Borough Hospital or Sanatorium for a short period of observation and investigation.

It is the aim of the Department to send reports to practitioners within a week. However, there is sometimes a slight delay due to the patient not being X-Rayed at the earliest opportunity, or neglect in not returning a specimen of sputum. Practitioners have been asked to advise the patients to bring a specimen of sputum with them on their first visit to the Dispensary.

The following table shows the results of the investigation of the new cases in 1935 :—

Number Examined.	Definitely Tuberculous.	Non-Tuberculous.	Doubtful.
785	350	187	248

CONTACTS.

The examination of contacts is perhaps one of the most important branches of the work undertaken by a Tuberculosis Dispensary. Accordingly it has been encouraged during the year, and 659 contacts have been examined. This number was made up as follows :— Males, 144 ; females, 210 ; boys, 133 ; girls, 172.

The following table shows the investigation of contacts :—

	Number Examined.	Definitely Tuberculous.	Non-Tuberculous.	Doubtful
Males	144	9	75	60
Females	210	16	130	64
Boys	133	3	82	48
Girls	172	4	107	61
Totals	659	32	394	233

It is gratifying to see the large proportion of adults who were examined as contacts, because it is in this section that unsuspected cases of sputum positive tuberculosis are likely to be found.

Domiciliary Visits.

The Clinical Tuberculosis Officer visited 92 patients in their homes during the year. Visits were only made at the request of the patient's doctor, and generally in personal consultation with him.

Sputa Examinations.

The sputum is examined whenever possible. Even in undoubtedly active cases of Tuberculosis it is occasionally necessary to examine the sputum on more than one occasion before the tubercle bacillus can be found. The Lowenstein-Janson method of cultivation has been found useful in many cases, although from personal experience it has not proved so valuable as some authorities would lead one to expect.

Seven hundred and thirty-one specimens were examined in connection with the Department during the year, including 21 by the Lowenstein-Janson method.

X-Ray Examinations.

One thousand two hundred and thirty-four X-Ray photographs were taken during the year in connection with the Tuberculosis Department. Skiagrams are taken as a routine of all new cases, except very young children, many contacts, and of old patients from time to time, in order to determine the progress of the disease. Serial films of the same patient provide a permanent graphic record, and are very useful in forming a prognosis. The scope of the work for the Department includes chests, spinal columns, long bones and joints. Skiagrams provide valuable help in both the treatment and diagnosis of Tuberculosis, and the installation of a new plant in the Sanatorium will be a great asset.

After-Care.

Patients on discharge from the Hospital or Sanatorium are requested to attend the Dispensary. This is for a longer or shorter period. Insured patients not receiving special treatment are referred to their own doctors, but are asked to attend periodically for the purpose of keeping records up to date. Dependants and non-insured patients are treated at the Dispensary if their means are too scanty to allow of sufficient medical attention being given elsewhere. Patients on special treatment are treated at the Dispensary in accordance with a memorandum of the Ministry of Health.

In the case of an insured patient too ill to attend the Dispensary for a periodical examination, a quarterly report is furnished by the medical practitioner on the patient's condition. During the year 72 reports were received.

Extra Nourishment.

The treatment of Tuberculosis necessitates a long period of inactivity, and consequently the richer man will do better than the poorer one, other things being equal, because he can afford more nourishing food. In poverty the most essential articles of diet are the first to be cut down, and a vicious circle is produced. In order to assist these poorer people, the Clinical Tuberculosis Officer can recommend a supply of nourishment. In most cases this takes the form of two pints of milk daily, and 1-lb. of butter weekly. About 50 people are in receipt of this. This scheme only applies to breadwinners, and does not include those unlikely to recover sufficiently to return to work.

Re-Housing of Infectious Cases.

There is no definite scheme at present for re-housing infectious cases, although, in a few cases, the unsatisfactory condition of the patients' houses having been brought to the notice of the Department, action has been taken. Slums and overcrowding are two of the main factors in the spread of Tuberculosis, and a great decrease in the mortality of this disease is expected to occur when slums cease to exist. A housing scheme in connection with the Tuberculosis Department is to be started in the near future, and some 50 houses are to be built on land near the Sanatorium.

Childhood Tuberculosis.

The examination of children for Tuberculous infection has proceeded unceasingly throughout the year. Although the mortality from Tuberculosis in children is very low, the morbidity is high, and the mortality in adolescent years alarming. It is felt by the Department that extensive investigation of children, especially those from sputum positive households, does lead to a collection of toxic children suffering from the effects of a Tuberculous infection. The more work done on children, the more it becomes evident that there is a condition in childhood bordering on the acute disease of adolescence with its almost 100% mortality. With this in view, treatment at Sanatorium schools has been urged in these borderline cases, in the hope of raising resistance and converting small active tubercles into fibrotic and calcified ones. The Mantoux test is a very delicate one for detecting the presence of a Tuberculous infection. This test has been applied to nearly every new child, and most contacts.

Since March, when the test was first started, about 700 children have been subjected to it. Not every child given a positive reaction is treated, because many seem to be in robust health. The test is most valuable in determining the toxic nature of a child manifesting general ill-health with signs and symptoms consistent with Tuberculosis. A detailed investigation regarding this subject and its relationship to adolescent Tuberculosis was carried out in the summer, and from past statistics it was found that :—

1. Children do die from Pulmonary Tuberculosis, although more die from Non-Pulmonary forms.

2. Between the ages of 15 and 25 years, the mortality from Non-Pulmonary forms is negligible, while that from Pulmonary disease is very considerable.

3. Nearly one-half of the persons who die between the ages of 15 and 25 years from all causes, die from Pulmonary Tuberculosis.

The following table shows the work on children during the year :—

	Definitely Tuberculous.	Non-Tuberculous.	Observation.
New Cases—			
Boys	45	49	35
Girls	44	34	41
Contacts—			
Boys	3	82	48
Girls	4	107	61
Total Number on Register—			
Boys	213	—	180
Girls	184	—	187

The greater part of the work on Tuesday morning is devoted to children, and the close co-operation with the school medical department and medical practitioners is very encouraging.

Tuberculosis in Seafarers.

This section applies to male patients only, who are notified cases of tuberculosis of the lungs, over the age of 14 years.

On December 31st, 1935, there were 540 notified male patients on the Dispensary Register. Of this number 97 were seafarers. The following table shows in what capacity each was employed, the total number of men employed in each occupation, and the percentage of Tuberculosis in each group.

Occupation.	Number of Notified Patients.	Number Employed.	Percentage.
Navigating Officers and Pilots ...	0	342	0
Engineering Officers	7	415	1.7
Petty Officers, Seamen and Deck Hands	32	1594	2.0
Wireless Operators	0	26	0
Firemen, Trimmers, Greasers, Donkey-men	15	796	1.9
Pursers, Stewards, Domestic Staff	43	2666	1.6
Bargemen and Boatmen... ...	0	145	0
Total Seafarers	97	5984	1.6
Non-Seafarers	443	52532	0.84
Total number of males over 14 ...	540	58516	0.92

Conclusions.—These figures are based on the 1931 Census. The percentage of Tuberculosis is low because the figures are those of notified patients on the Dispensary Register, and do not represent the total cases of Tuberculosis. Nevertheless, it is not a gross error to assume that the incidence of Tuberculosis is approximately twice as high in seafarers as in the non-seafarers.

Institutional Treatment.

The institutions provided for the treatment of Tuberculosis are the County Borough Sanatorium, Millbrook, and the Borough Hospital, Shirley Warren. There are 48 beds at the former and 45 beds at the latter institution, allocated as follows :—

Borough Sanatorium	20 male beds. 28 female beds.
Borough Hospital	31 male beds. 14 female beds.

One hundred and fifty-nine patients were admitted to the Sanatorium during the year. One hundred and thirteen were discharged, in most cases when the disease was quiescent, and five died. On 31st December 41 beds were occupied.

A new pavilion of 36 beds is now in the course of construction adjoining the present Sanatorium. This will fill a long-felt want in Southampton, and the long waiting lists will, it is hoped, be a thing of the past.

The pavilion is to be built on the most up to date lines, mostly consisting of cubicles. Two eight-bedded wards are situated at either end. In addition to a duty room, an operating theatre, dental room and X-Ray plant, with various ante-rooms, are included.

Throughout the year Tuberculous children have been sent to the East Anglian Sanatorium School, Nayland, Colchester. Some 30 to 40 places in the School have been continually filled.

Children suffering from Non-Pulmonary Tuberculosis are treated at Lord Mayor Treloar's Cripple Hospital, Alton.

In a few instances, when a mother is in need of Sanatorium treatment, and no relative can be found to look after her children, they have been sent to the Council's Hollybrook Homes.

Two patients have been sent to the Village Settlement and Training Colony, at Papworth.

Two patients suffering from Non-Pulmonary Tuberculosis were sent to the Royal Sea-bathing Sanatorium, Margate.

The therapeutic aspect of Tuberculosis is up to date, and carried out in the Institutions provided by the Council. Treatment by collapsing the affected lung is carried out whenever possible in suitable cases. In some cases benefit is derived from paralysing one-half of the diaphragm, or phrenic evulsion. Thoracoplasty consists in removing parts of the ribs on the affected side. This is a severe operation, and no case was subjected to it during the year. One patient had a phrenic evulsion performed.

The following table summarises the work done in this respect :

Artificial Pneumothorax inductions, successful	8
Artificial Pneumothorax inductions, unsuccessful, due to adhesions between the pleural layers	2
Refills for maintaining the Pneumothorax ...	501
Phrenic Evulsion	1
Thoracoplastic operations	0
Number of patients having A.P. treatment on 31st December	23
Number of patients in whom A.P. treatment was discontinued during the year :—	
1. Transferred to another area ...	2
2. Cured	1
3. Developed effusion	3

The injection of gold salts has been increasingly used during the year, and definite improvement has been noticed in patients receiving this treatment.

Several patients have benefited by the use of Tuberculin.

During the year an assistant to the Tuberculosis Department was appointed. He is resident at the Sanatorium and his duties consist of daily work amongst the patients in the Sanatorium, and three sessions weekly at the Dispensary.

Dental Treatment.

The services of the Dental Clinic have been placed at the disposal of patients attending the Dispensary, where the Tuberculosis Officer has deemed treatment necessary, and during the year he has referred 13 cases to the dental surgeons, who have given treatment in each case.

General Observations.

The increased work of the Tuberculosis Department shown in 1934 was maintained in 1935. More new cases were referred by medical practitioners, and although the number of contacts examined was approximately 15% less than in 1934, the number of notifications and deaths, from which contacts are drawn, was 30% less. It is therefore seen that there was a relative increase in contact examinations.

The decline in the mortality rate in the Borough from Tuberculosis is very gratifying and encouraging. The figure for 1935 is the lowest on record for the Borough.

Compared with figures for 1934 supplied by the Ministry of Health of the average work done by County Boroughs in Tuberculosis, the work done in Southampton exceeds the average in every branch.

The continuance of a successful Tuberculosis scheme depends on the following factors :—

1. Adequate sanatorium accommodation for adults.
2. Adequate sanatorium accommodation for children at sanatorium schools.
3. Complete co-operation between practitioners and the Department.
4. The treatment of incipient cases of Tuberculosis.
5. The systematic examination of contacts.
6. The notification of the disease in its earliest stages.

(A) Return showing the work of the Dispensary (or Dispensaries) during the year 1935.

Diagnosis.	Pulmonary.				Non-Pulmonary.				Total.				Grand Total.
	Adults.		Children.		Adults.		Children.		Adults.		Children.		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
A.—New Cases examined during the year (excluding contacts):—													
(*a*) Definitely Tuberculous	113	139	41	40	6	3	4	4	119	142	45	44	350
(*b*) Diagnosis not completed	—	—	—	—	—	—	—	—	70	102	35	41	248
(*c*) Non-Tuberculous	—	—	—	—	—	—	—	—	46	58	49	34	187
													785
B.—Contacts examined during the year:—													
(*a*) Definitely Tuberculous	9	16	3	4	—	—	—	—	9	16	3	4	32
(*b*) Diagnosis not completed	—	—	—	—	—	—	—	—	60	64	48	61	233
(*c*) Non-Tuberculous	—	—	—	—	—	—	—	—	75	130	82	107	394
													659
C.—Cases written off the Dispensary Register as:—													
(*a*) Recovered	5	10	—	—	1	—	—	—	6	10	—	—	16
(*b*) Non-Tuberculous (including any such cases previously diagnosed and entered on the Dispensary Register as Tuberculous)	—	—	—	—	—	—	—	—	170	245	133	156	704
													720
D.—Number of Cases on Dispensary Register on December 31st:—													
(*a*) Definitely Tuberculous	540	531	178	151	24	19	35	33	564	550	213	184	1511
(*b*) Diagnosis not completed	—	—	—	—	—	—	—	—	239	313	180	187	919
													2430

TUBERCULOSIS SCHEME.—Continued.

(A) Return showing the work of the Dispensary (or Dispensaries) during the year 1935.—Continued.

1. Number of cases on Dispensary Register on January 1st	1827	2. Number of cases transferred from other areas and cases returned after discharge under Head 3 in previous years	15
3. Number of cases transferred to other areas, cases not desiring further assistance under the Scheme, and cases "lost sight of" ...	37	4. Cases written off during the year as Dead (all causes)	99
5. Number of attendances at the Dispensary (including contacts)	12,453	6. Number of Insured Persons under Domiciliary Treatment on the 31st December ...	18
7. Number of consultations with medical practitioners:— (*a*) Personal... ... ... (*b*) Other	102 716	8. Number of visits by Tuberculosis Officers to Homes (including personal consultations)	92
9. Number of visits by Nurses or Health Visitors to Homes for Dispensary Purposes	7,246	10. Number of— Lowenstein-Janson tests ... ... (*a*) Specimens of sputum, &c., examined (*b*) X-ray examinations made ... ... in connexion with Dispensary work	21 710 — 731 1,234
11. Number of "Recovered" cases restored to Dispensary Register, and included in A (*a*) and A (*b*) on previous page	16	12. Number of "T.B. plus" cases on Dispensary Register on December 31st	433

(B) Number of Dispensaries for the treatment of Tuberculosis (excluding centres used only for special forms of treatment).

Provided by the Council 2
Provided by Voluntary Bodies ... ... Nil.

Silicosis and Asbestosis (Medical Arrangements) Scheme, 1931.

Under the above Scheme, which was issued by the Home Office, every employer engaged in an industry or process included in the First Schedule to the Scheme is required to arrange for the initial examination of any workman newly engaged by him within two months of his commencing to be employed in the industry or process, and any workman found at such examination to be suffering from Tuberculosis or otherwise failing to reach the standard of health and physique prescribed must be suspended from employment in the industry or process.

The Clinical Tuberculosis Officer is authorised by the Council to carry out initial examinations of workmen engaged in the industry, for which the Home Office pay a fee of 6/- for each examination to the Local Authority.

Public Health (Prevention of Tuberculosis) Regulations, 1925.

These Regulations give local authorities power to require Tuberculous employees, who are in an infectious state, engaged in the milk trade, to discontinue their employment or occupation.

It was not necessary to take any action under these Regulations during the year.

Public Health Act, 1925—*Section* 62.

This section gives power to local authorities to enforce any person suffering from Pulmonary Tuberculosis, who is in an infectious state, without proper lodging or accommodation, and is a serious risk of infection to other persons, to be removed to a suitable hospital or institution.

No action was taken under this section during the year.

For statistical purposes, cases are divided up according to the classification suggested by the Ministry of Health :—

I. All patients are grouped according to sex and age, those under 15 years of age being classed as children.

II. Classification as to whether the disease is (a) Pulmonary or (b) Non-Pulmonary.

III. Patients suffering from Pulmonary Tuberculosis are divided into :—

Class T.B. minus—viz., those in which Tubercle Bacilli have not been discovered in the sputum.

Class T.B. plus—viz., cases in which Tubercle Bacilli have been found in the sputum.

This latter class is further sub-divided into :—

Group 1. Cases with slight constitutional disturbance and with the disease limited to the apex of one lobe only, with slight exceptions.

Group 3. Cases with profound systemic disturbance with marked impairment of function, and with little chance of recovery.

Group 2. All cases which cannot be included in the above groups.

IV. Patients suffering from Non-Pulmonary Tuberculosis classified according to the site of lesion.

The tables given are also those suggested by the Ministry of Health, and adopted for the sake of uniformity throughout the service.

The results of treatment are described by the following terms :—

Quiescent.—Cases which have no signs or symptoms of disease left.

Arrested.—Cases which have been quiescent for at least two years.

Cured.—Those in which the disease has been " arrested " for three years.

Improved.—Cases in which their general condition is better.

No material improvement.—All other patients who are alive.

The following Tables are prepared in the form required by the Ministry of Health. They show the work carried out at the Dispensaries, at No. 1, East Park Terrace, and Sydney House, and a record of patients admitted to, and the results of treatment of patients discharged from the Borough Sanatorium and the Borough Hospital during the year 1935 :—

TUBERCULOSIS SCHEME.—Continued.

(C) Number of Beds available for the treatment of Tuberculosis on the 31st December in Institutions belonging to the Council.

Name of Institution.	For Pulmonary Cases.		For Non-Pulmonary Cases.		Total.
	Adults.	Children under 15.	Adults.	Children under 15.	
Southampton Borough Sanatorium	48	—	—	—	48
Southampton Borough Hospital	45	—	—	—	45

Children suffering from Pulmonary Tuberculosis are also admitted to the East Anglian Sanatorium, Colchester.

Children suffering from Non-Pulmonary Tuberculosis are admitted to Lord Mayor Treloar's Hospital, Alton.

(D) Return showing the extent of Residential Treatment and Observation in the Borough Sanatorium, the Borough Hospital and other Institutions for which the County Borough Council have an arrangement.

		In Institutions on Jan. 1st. (1)	Admitted during the year. (2)	Discharged during the year. (3)	Died in the Institutions. (4)	In Institutions on Dec. 31st. (5)
Number of doubtfully Tuberculous Cases admitted for observation.	Adult Males ...	4	7	9	—	2
	Adult Females...	2	7	9	—	—
	Children ...	2	4	6	—	—
	Total ...	8	18	24	—	2
Number of Patients suffering from Pulmonary Tuberculosis.	Adult Males ...	28	141	102	37	30
	Adult Females...	13	141	107	16	31
	Children ...	17	136	72	1	80
	Total ...	58	418	281	54	141
Number of Patients suffering from non-Pulmonary Tuberculosis.	Adult Males ...	6	4	8	1	1
	Adult Females...	3	4	6	1	—
	Children ...	2	3	3	2	—
	Total ...	11	11	17	4	1
Grand Total		77	447	322	58	144

TUBERCULOSIS SCHEME.—Continued.

(F) Return showing the results of observation of doubtfully Tuberculous cases discharged during the year from the Borough Sanatorium.

Diagnosis on discharge from observation.	For Pulmonary Tuberculosis.						For Non-Pulmonary Tuberculosis.						Totals.		
	Stay under 4 weeks.			Stay over 4 weeks.			Stay under 4 weeks.			Stay over 4 weeks.					
	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.
Tuberculous	3	2	—	2	1	2	—	—	—	—	—	—	5	3	2
Non-Tuberculous ...	2	3	1	1	1	1	—	—	—	—	—	—	3	4	2
Doubtful	1	2	—	—	—	2	—	—	—	—	—	—	1	2	2
Totals	6	7	1	3	2	5	—	—	—	—	—	—	9	9	6

during the year from Institutions for the treatment of Tuberculosis.

Classification on admission to the Institutions.		Condition at time of discharge.	Duration of Residental Treatment in the Institutions.															Grand Totals.
			Under 3 months but exceeding 28 days.			3–6 months.			6–12 months.			More than 12 months.			Totals.			
			M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	M.	F.	Ch.	
Pulmonary Tuberculosis.	Class T.B. minus.	Quiescent	18	22	6	7	16	22	2	3	21	—	—	4	27	41	53	121
		Not quiescent	3	5	2	—	—	8	—	—	6	—	—	—	3	5	16	24
		Died in Institution ...	1	1	—	1	—	—	—	—	—	—	—	—	2	1	—	3
	Class T.B. plus. Group 1.	Quiescent	5	2	—	2	—	—	—	—	—	—	—	—	7	2	—	9
		Not quiescent	—	1	1	—	—	—	—	—	—	—	—	—	—	1	1	2
		Died in Institution ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Class T.B. plus. Group 2.	Quiescent	8	7	—	11	10	—	—	—	—	—	—	—	19	17	—	36
		Not quiescent	6	6	—	3	5	—	5	1	—	—	—	—	14	12	—	26
		Died in Institution ...	1	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1
	Class T.B. plus. Group 3.	Quiescent	2	1	—	3	2	—	1	1	—	—	—	—	6	4	—	10
		Not quiescent	4	3	1	1	3	—	—	1	—	—	—	—	5	7	1	13
		Died in Institution ...	9	7	—	4	3	—	3	2	—	2	—	—	18	12	—	30
Totals (Pulmonary) ...			57	55	10	32	39	30	11	8	27	2	—	4	102	102	71	275
Non-Pulmonary Tuberculosis.	Bones and Joints.	Quiescent	—	—	—	1	1	1	1	—	1	—	1	—	2	2	2	6
		Not quiescent	—	—	—	—	—	—	1	—	1	—	1	—	1	1	1	3
		Died in Institution ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Abdominal.	Quiescent	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
		Not quiescent	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
		Died in Institution ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Other Organs.	Quiescent	—	—	—	1	—	—	—	—	—	—	—	—	1	—	—	1
		Not quiescent	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
		Died in Institution ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
	Peripheral Glands.	Quiescent	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
		Not quiescent	1	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1
		Died in Institution ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Totals (Non-Pulmonary) ...			1	—	—	2	1	1	2	—	2	—	2	—	5	3	3	11

TUBERCULOSIS SCHEME.

(M. of H. Form T. 145 A).

PULMONARY TUBERCULOSIS.—Supplementary Annual Return showing in summary form (a) the condition at the end of 1935 of all patients remaining on the Dispensary Register; and (b) the reasons for the removal of all cases written off the Register. The Table is arranged according to the years in which the patients were first entered on the Dispensary Register as definite cases of Pulmonary Tuberculosis, and their classification at that time.

	Condition at the time of the last record made during the year to which the return relates.		Previous to 1926					1926					1927					1928				
			Class T.B. minus	Class T.B. plus				Class T.B. minus	Class T.B. plus				Class T.B. minus	Class T.B. plus				Class T.B. minus	Class T.B. plus			
				Group 1	Group 2	Group 3	Total (Class T.B. plus)		Group 1	Group 2	Group 3	Total (Class T.B. plus)		Group 1	Group 2	Group 3	Total (Class T.B. plus)		Group 1	Group 2	Group 3	Total (Class T.B. plus)
(a) Remaining on Dispensary Register on 31st December	Disease Arrested	Adult Males ...	4	1	2	2	5	...	...	...	1	1	1	...	...	...	...	1	1	...	...	1
		Adult Females	8	...	...	...	...	2	...	...	...	...	...	1	...	1	2	2	2	...	...	2
		Children ...	...	...	...	...	...	1	...	1	...	1	...	...	...	...	...	1	...	...	1	1
	Disease not Arrested	Adult Males ...	...	...	...	1	1	...	...	...	...	...	...	...	1	1	2	...	...	...	1	1
		Adult Females	...	...	1	...	1	...	...	...	...	...	...	...	2	1	3	...	1	...	3	4
		Children ...	...	1	1	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Condition not ascertained during the year		42	4	3	3	10	3	1	...	1	2	2	2	1	...	3	9	2	...	8	10
	Total on Dispensary Register at 31st December		54	6	7	6	19	6	1	1	2	4	3	3	4	3	10	13	6	...	13	19
(b) Not now on Dispensary Register and reasons for removal therefrom	Discharged as Recovered	Adult Males ...	17	1	2	...	3	1	...	...	...	...	3	1	...	...	1	5	...	...	...	...
		Adult Females	21	1	1	...	2	3	...	...	...	...	2	...	...	...	...	4	...	...	...	...
		Children ...	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Lost sight of, or otherwise removed from Dispensary Register		47	6	8	3	17	4	...	2	...	2	6	2	3	1	6	8	2	1	9	12
	Dead	Adult Males ...	4	...	3	9	12	...	...	1	4	5	2	3	2	2	7	...	1	2	3	6
		Adult Females	2	...	...	4	4	...	1	...	2	3	...	...	2	2	4	1	...	2	1	3
		Children ...	...	...	2	...	2	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1
	Total written off Dispensary Register		95	8	16	16	40	8	1	3	6	10	13	6	7	5	18	18	3	5	14	22

PULMONARY TUBERCULOSIS. Supplementary Annual Return showing in summary form (a) the condition at the end of 1935 of all patients remaining on the Dispensary Register; and (b) the reasons for the removal of all cases written off the Register. The Table is arranged according to the years in which the patients were first entered on the Dispensary Register as definite cases of Pulmonary Tuberculosis, and their classification at that time.

Condition at the time of the last record made during the year to which the return relates.		1929					1930					1931					1932				
		Class T.B. minus	Class T.B. plus				Class T.B. minus	Class T.B. plus				Class T.B. minus	Class T.B. plus				Class T.B. minus	Class T.B. plus			
			Group 1	Group 2	Group 3	Total (Class T.B. plus)		Group 1	Group 2	Group 3	Total (Class T.B. plus)		Group 1	Group 2	Group 3	Total (Class T.B. plus)		Group 1	Group 2	Group 3	Total (Class T.B. plus)
(a) Remaining on Dispensary Register on 31st December	Disease Arrested — Adult Males ...	8	...	1	1	2	6	...	1	2	3	3	2	3	...	5	8	1	5	...	6
	Disease Arrested — Adult Females	3	...	...	...	...	4	1	1	1	3	4	1	...	1	2	3	...	...	...	...
	Disease Arrested — Children ...	1	...	...	...	...	4	1	...	...	1	1	...	...	...	...	8	...	...	...	...
	Disease not Arrested — Adult Males ...	...	2	...	3	5	...	1	...	2	3	1	...	4	2	6	2	...	9	5	14
	Disease not Arrested — Adult Females	1	...	...	3	3	3	1	...	3	4	1	...	2	2	4	5	...	9	4	13
	Disease not Arrested — Children ...	2	...	...	...	...	2	...	...	1	1	2	...	...	...	...	2	...	1	...	1
	Condition not ascertained during the year	19	2	1	9	12	21	1	...	7	8	25	3	6	3	12	25	2	9	1	12
	Total on Dispensary Register at 31st December	34	4	2	16	22	40	5	2	16	23	37	6	15	8	29	53	3	33	10	46
(b) Not now on Dispensary Register and reasons for removal therefrom	Discharged as Recovered — Adult Males ...	6	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Discharged as Recovered — Adult Females	5	2	...	...	2	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Discharged as Recovered — Children ...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Lost sight of, or otherwise removed from Dispensary Register	28	...	2	7	9	32	3	1	10	14	30	4	12	8	24	22	8	18	9	35
	Dead — Adult Males ...	...	1	1	15	17	3	2	2	22	26	5	3	13	17	33	10	1	29	19	49
	Dead — Adult Females	3	...	3	11	14	2	...	2	8	10	4	1	6	9	16	7	...	12	9	21
	Dead — Children ...	1	...	...	1	1	1	...	...	...	...	...	...	...	...	...	3	...	...	...	...
	Total written off Dispensary Register	44	3	6	34	43	39	5	5	40	50	39	8	31	34	73	42	9	59	37	105
GRAND TOTALS		78	7	8	50	65	79	10	7	56	73	76	14	46	42	102	95	12	92	47	151

TUBERCULOSIS SCHEME.—Continued.

PULMONARY TUBERCULOSIS.—Supplementary Annual Return showing in summary form (a) the condition at the end of 1935 of all patients remaining on the Dispensary Register; and (b) the reasons for the removal of all cases written off the Register. The Table is arranged according to the years in which the patients were first entered on the Dispensary Register as definite cases of Pulmonary Tuberculosis, and their classification at that time.

Condition at the time of the last record made during the year to which the return relates.		1933					1934					1935				
		Class T.B. minus	Class T.B. plus				Class T.B. minus	Class T.B. plus				Class T.B. minus	Class T.B. plus			
			Group 1	Group 2	Group 3	Total (Class T.B. plus)		Group 1	Group 2	Group 3	Total (Class T.B. plus)		Group 1	Group 2	Group 3	Total (Class T.B. plus)
(a) Remaining on Dispensary Register on 31st December	Disease Arrested — Adult Males	8	1	3	...	4	...	...	...	...	...	...	...	...	...	...
	Disease Arrested — Adult Females	7	1	1	...	2	...	...	...	...	...	...	...	...	...	...
	Disease Arrested — Children	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Disease not Arrested — Adult Males	5	3	14	6	23	101	2	35	15	52	55	3	30	22	55
	Disease not Arrested — Adult Females	12	1	14	3	18	135	8	31	8	47	100	2	24	16	42
	Disease not Arrested — Children	5	...	...	...	...	189	2	...	...	2	89	2	...	...	2
	Condition not ascertained during the year	17	2	11	1	14	...	...	...	...	...	...	...	...	...	...
	Total on Dispensary Register at 31st December	58	8	43	10	61	425	12	66	23	101	244	7	54	38	99
(b) Not now on Dispensary Register and reasons for removal therefrom	Discharged as Recovered — Adult Males	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Discharged as Recovered — Adult Females	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Discharged as Recovered — Children	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Lost sight of, or otherwise removed from Dispensary Register	15	...	13	3	16	14	1	3	3	7	4	...	2	...	2
	Dead — Adult Males	6	3	15	12	30	3	1	7	22	30	2	...	1	13	14
	Dead — Adult Females	1	...	16	11	27	1	...	6	10	16	2	...	4	5	9
	Dead — Children	...	...	1	...	1	...	...	1	1	2	...	...	...	...	...
	Total written off Dispensary Register	22	3	45	26	74	18	2	17	36	55	8	...	7	18	25

NON-PULMONARY TUBERCULOSIS.—Supplementary Annual Return showing in summary form (a) the condition at the end of 1935 of all patients remaining on the Dispensary Register; and (b) the reasons for the removal of all cases written off the Register.

Condition at the time of the last record made during the year to which the return relates		Previous to 1926					1926					1927					1928				
		Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total
(a) Remaining on Dispensary Register on 31st December	Disease Arrested — Adult Males	1	...	...	...	1	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Disease Arrested — Adult Females	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Disease Arrested — Children	2	...	...	...	2	1	...	...	...	1	1	...	...	...	1	...	...	...	...	...
	Disease not Arrested — Adult Males	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...
	Disease not Arrested — Adult Females	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Disease not Arrested — Children	1	...	...	...	1	...	...	...	...	...	...	...	...	...	...	3	...	...	...	3
	Condition not ascertained during the year	6	...	1	...	7	1	...	...	...	1	1	...	...	...	1	2	...	...	...	2
	Total on Dispensary Register at 31st December	10	...	1	...	11	2	...	...	1	3	2	...	...	...	2	5	...	...	...	5
Transferred to Pulmonary		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
(b) Not now on Dispensary Register and reasons for removal therefrom	Discharged as Recovered — Adult Males	3	1	...	...	4	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Discharged as Recovered — Adult Females	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Discharged as Recovered — Children	1	...	...	...	1	1	...	...	...	1	...	1	...	...	1	...	1	...	3	4
	Lost sight of, or otherwise removed from Dispensary Register	7	...	...	2	9	1	...	...	...	1	...	...	2	...	2	2	...	...	1	3
	Dead — Adult Males	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Dead — Adult Females	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Dead — Children	...	...	...	...	...	...	...	1	...	1	...	...	...	...	...	...	...	...	...	...
	Total written off Dispensary Register	11	1	...	2	14	2	...	1	...	3	...	1	2	...	3	2	1	...	4	7
GRAND TOTALS of (a) and (b) (excluding those transferred to Pulmonary)		21	1	1	2	25	4	...	1	1	6	2	1	2	...	5	7	1	...	4	12

TUBERCULOSIS SCHEME.—Continued.

NON-PULMONARY TUBERCULOSIS.—Supplementary Annual Return showing in summary form (a) the condition at the end of 1935 of all patients remaining on the Dispensary Register; and (b) the reasons for the removal of all cases written off the Register.

Condition at the time of the last record made during the year to which the return relates		1929					1930					1931					1932				
		Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total
(a) Remaining on Dispensary Register on 31st December	Disease Arrested — Adult Males	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1
	Disease Arrested — Adult Females	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Disease Arrested — Children ...	...	...	...	...	...	1	...	...	2	3	...	1	...	...	1	2	...	...	1	3
	Disease not Arrested — Adult Males ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1
	Disease not Arrested — Adult Females	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...
	Disease not Arrested — Children ...	...	...	...	1	1	1	...	...	...	1	...	1	...	...	1	2	...	...	1	3
	Condition not ascertained during the year	4	...	1	2	7	...	1	...	...	1	3	...	1	2	6	3	...	1	...	4
	Total on Dispensary Register at 31st December	4	...	1	3	8	2	1	...	2	5	3	2	1	3	9	8	...	2	2	12
Transferred to Pulmonary		...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	1
(b) Not now on Dispensary Register and reasons for removal therefrom	Discharged as Recovered — Adult Males ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	...	...	1
	Discharged as Recovered — Adult Females	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Discharged as Recovered — Children ...	...	...	...	...	...	1	1	...	...	2	...	1	...	1	2	...	...	...	...	...
	Lost sight of, or otherwise removed from Dispensary Register	1	...	...	...	1	1	...	...	3	4	1	1	2	...	4	7	1	2	5	15
	Dead — Adult Males ...	...	...	...	...	...	...	...	...	...	...	...	...	1	...	1	2	1	1	1	5
	Dead — Adult Females	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	...	2
	Dead — Children ...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...	1	1	...	2
	Total written off Dispensary Register	1	...	...	...	1	2	1	...	3	6	1	2	3	1	7	10	4	5	6	25
GRAND TOTALS of (a) and (b) (excluding those transferred to Pulmonary)		5	...	1	3	9	4	2	...	5	11	4	4	4	4	16	18	4	7	8	37

Supplementary Annual Return showing in summary form (a) the condition at the end of 1935 of all patients remaining on the Dispensary Register; and (b) the reasons for the removal of all cases written off the Register.

Condition at the time of the last record made during the year to which the return relates.			1933					1934					1935				
			Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total	Bones and Joints	Abdominal	Other Organs	Peripheral Glands	Total
(a) Remaining on Dispensary Register on 31st December	Disease Arrested	Adult Males	...	...	...	1	1	...	...	...	...	...	...	...	...	...	...
		Adult Females	...	...	...	...	...	...	...	...	1	1	...	...	...	...	...
		Children	1	1	...	1	3	...	...	...	1	1	...	...	...	...	...
	Disease not Arrested	Adult Males	2	...	...	...	2	...	2	3	...	5	4	...	2	...	6
		Adult Females	...	...	...	1	1	1	1	1	1	4	2	...	...	1	3
		Children	5	...	...	1	6	2	...	...	3	5	3	2	...	4	9
	Condition not ascertained during the year		3	2	1	2	8	1	...	...	...	1	...	...	...	...	...
	Total on Dispensary Register at 31st December		11	3	1	6	21	4	3	4	6	17	9	2	2	5	18
Transferred to Pulmonary			...	1	...	1	2	...	...	...	...	...	...	...	...	...	...
(b) Not now on Dispensary Register and reasons for removal therefrom	Discharged as Recovered	Adult Males	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
		Adult Females	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
		Children	...	...	...	...	...	...	...	...	...	...	...	...	...	...	...
	Lost sight of, or otherwise removed from Dispensary Register		2	...	...	1	3	...	...	...	...	...	1	...	...	...	1
	Dead	Adult Males	1	...	...	...	1	...	...	...	...	...	...	...	...	...	...
		Adult Females	...	...	...	...	...	2	...	...	...	2	...	...	...	...	...
		Children	...	...	2	...	2	...	...	...	...	...	...	...	...	...	...
	Total written off Dispensary Register		3	...	2	1	6	2	...	...	...	2	1	...	...	...	1
GRAND TOTALS of (a) and (b) (excluding those transferred to Pulmonary)			14	3	3	7	27	6	3	4	6	19	10	2	2	5	19

CANCER.

The number of deaths from Cancer amounted to 299, of which 158 were males and 141 females.

This number is an increase of 12 compared with the previous year, and is equal to a death-rate of 1.69 per 1,000 of the population. This rate is 0.10 above the average for 10 years.

The following table shows the death-rate from Cancer in the Municipal Wards during the year 1935, and, for comparison, the average death-rate from the disease for the previous ten years :—

Ward.	Death-rate, 1935.	Average 10 years,	Death-rate, 1925—1934.
1. Town	2.01	...	1.97
2. St. Mary's	2.13	...	1.39
3. Northam	1.31	...	1.46
4. Trinity	2.61	...	1.68
5. Newtown	1.42	...	1.96
6. All Saints	2.05	...	1.80
7. Bevois	3.02	...	2.02
8. Banister	1.81	...	1.54
9. Freemantle	2.14	...	1.91
10. Millbrook	1.91	...	1.34
11. Shirley	1.08	...	1.65
12. Portswood	2.15	...	1.65
13. St. Denys	1.84	...	1.59
14. Bitterne and Pear Tree	1.54	...	1.31
15. Bitterne and Sholing ...	1.09	...	1.34
16. Woolston	1.28	...	1.60
17. St. Nicholas	1.00	...	1.42
Borough	1.69	...	1.59

Deaths from Cancer during the year 1935, showing the parts of he body primarily affected.

Situation.	Male.	Female.
Buccal Cavity and Pharynx.		
Floor of Mouth ...	2	—
Jaw	1	—
Lower Lip	1	—
Maxilla	1	—
Palate	1	—
Pharynx	1	—
Tonsil	1	1
Tongue	10	—
	18	1
Digestive System and Peritoneum.		
Abdominal Wall ...	1	—
Anus	—	1
Bowel	1	1
Cæcum	1	1
Colon	11	19
Duodenum	—	1
Gall Bladder ...	1	4
Liver	8	5
Œsophagus	12	2
Pancreas	2	3
Peritoneum	1	—
Pylorus	2	—
Rectum	20	10
Sigmoid	1	1
Stomach	36	21
	97	69
Respiratory Organs.		
Lung	2	2
Larynx	8	—
Left Bronchus ...	1	—
Mediastinum ...	3	—
Pharynx	—	1
	14	3
Uterus and Female Genital Organs.		
Ovary	—	4
Uterus	—	23
Vulva	—	1
	—	28
Breast	—	31
Male Genito-Urinary Organs.		
Bladder	5	—
Kidney	4	—
Penis	1	—
Prostate	8	—
Testicle	1	—
	19	—
Skin	2	1
Unclassified.		
Abdomen	—	2
Base of Skull ...	1	—
Bladder	—	1
Carotid Gland ...	1	—
Cervical Glands ...	1	—
Cheek	1	—
Disseminated ...	—	1
Glands of Neck ...	1	—
Humerus	—	1
Kidney	—	2
Lymphosarcoma ...	1	—
Neck	1	—
Thyroid Gland ...	1	1
	8	8

Municipal Hospitals

and

Municipal Laboratories.

BOROUGH HOSPITAL.

The Borough Hospital, previously the Shirley Warren Poor Law Infirmary, was appropriated under the Local Government Act as a General Hospital under the Public Health Acts, and the administration transferred to the Health Committee.

The Hospital consists of four Male Pavilions of eight wards, and four Female Pavilions of seven wards. In addition there are in each Pavilion, on an average, four Side Wards containing three or four beds.

On the male side of the Hospital, ST. MICHAEL'S PAVILION consists of a Lower Ward in which acute surgical cases are exclusively treated, the Side Wards being devoted to the treatment of boys over 5 and under 16 years of age, and an Upper Ward, to which chronic or inoperable surgical cases are periodically drafted from the Lower Ward. These Wards are visited on three days a week by the Visiting Surgeon. SHIRLEY PAVILION consists of a Lower Ward in which acute medical cases are treated, and an Upper Ward to which chronic medical cases are drafted as occasion arises. In the Side Wards, boys of over 5 and under 16 years of age are treated for acute medical conditions. The Visiting Physician controls the treatment of patients in these Wards on his visits three days a week. PORTSWOOD PAVILION consists of a Lower Ward in which senile and bed-ridden patients are treated. The patients in this Ward are almost all over 70 years of age. The Upper Ward is exclusively confined to the treatment of advanced Pulmonary Tuberculosis, the majority of which cases have at some time or another been under the care of the Tuberculosis Officer and have therefore received treatment at the Municipal Dispensary. Finally, in ST. JOHN'S PAVILION, the Lower Ward is now in full working order as a Tonsils and Adenoids Ward. The Day Room has been converted into a well-equipped Theatre, and the Ward is exclusively used for these cases. They are admitted on a Monday afternoon, operated upon on Tuesday morning by an Aural Specialist, and discharged on the following afternoon. This arrangement has worked admirably. The Upper Ward is reserved for male Venereal cases requiring Hospital treatment, and Skin Diseases. The Clinics are held by the Resident Medical Superintendent on four days a week in a well-equipped and up-to-date Treatment Room. The Venereal Disease Officer visits the Hospital one afternoon a week, when he reviews the cases and works in co-operation with the Resident Medical Superintendent.

On the female side of the Hospital, Holyrood Pavilion consists of one Ward containing eight Maternity beds, and a Labour Room where the cases are confined. This Maternity unit is well equipped, but the number of beds is inadequate to the needs of the Hospital, and requires extension. The Ward is under the charge of a Sister who is a certified Midwife, and also an approved Lecturer in practical midwifery to the pupil Midwives, who are senior nurses specially selected for this work. St. Lawrence Pavilion is the Female Surgical unit and on the Lower Ward acute surgical and gynaecological cases are treated. This section is under the care of the Visiting Surgeon. The Upper Ward is devoted to the treatment of female Venereal cases and Skin Diseases. The Clinic is under the charge of the Resident Medical Superintendent, who works in co-operation with the Venereal Disease Officer who reviews these cases once a week. It also has a well-equipped Treatment Room similar to that on Upper St. John's Ward. All Saints Pavilion is devoted to the treatment of acute medical cases in the Lower Ward, while the Upper Ward is used for chronic medical cases. This Pavilion is under the charge of the Visiting Physician. The Lower Side Wards are reserved for female staff patients. St. Mary's Pavilion consists of a Lower Ward for the treatment of children up to 5 years of age and an Upper Ward, separated by a partition into two Wards, the first of which is used for female senile cases, while the Back Ward (with enclosed balcony) is reserved for advanced female phthisical cases.

Finally, there are well-equipped Operating Theatre, X-Ray, and Massage Departments. The chief operating day is on Thursday morning, but urgent operations may prove necessary on any day and at any time during the week. Two sessions for X-Ray examinations are held by the Visiting Radiologist on Monday and Thursday afternoons. The patients undergoing X-Ray examination are selected partly from Hospital In-Patients and partly from Tuberculous Out-Patients selected by the Tuberculosis Officer from his Dispensary patients. On the same afternoon the Tuberculosis Officer visits the Hospital and makes use of the Operating Theatre, where he operates on the chests of selected Tuberculous cases, working in conjunction with the Radiologist. On Wednesday afternoons the Tuberculosis Officer visits the male and female patients under treatment in the Borough Hospital.

Apart from the visits of the Visiting Physician and Surgeon on Mondays, Tuesdays, Wednesdays, Thursdays and Saturdays, the Hospital is also visited on Friday mornings by the Consulting Surgeon, who sees selected cases in consultation. The Consulting Surgeon also operates in the absence of the Visiting Surgeon, and from time to time he holds theoretical and practical examinations in the Hospital for Senior Nurses.

Massage Department.

This department is under the charge of a competent Masseuse, who treats cases of fracture, dislocation, palsy, contracture, etc., selected by the Medical Officers. She also gives remedial exercises to convalescent patients. A certain number of Out-Patients are also treated in this department.

Operative Surgery.

As will be seen from Table E, 636 operations were successfully performed during the year. Of this number, 345 were Tonsils and Adenoids, Mastoid operations, etc., performed by the Aural Surgeon.

The X-Ray Department.

A Mobile X-Ray apparatus has recently been installed, and has proved invaluable for taking X-Ray photographs of patients too ill to be moved to the X-Ray room.

Midwifery.

The Right Honourable Sir Kingsley Wood, M.P., Minister o Health, visited the Hospital on 3rd October, and laid the founda tion stone of the new Maternity Unit. A visiting Obstetrician ha been appointed, and he visits the Hospital on three days a week and also as occasion arises.

The Nurses' Home.

The extension to the Nurses' Home was opened by Hi Worship the Mayor (Councillor G. A. Waller) on Wednesday 10th July, and the wing is now in occupation.

Hospital Wards.

Portswood and St. Mary's Wards were painted and r decorated during this summer. This completes the painting the Wards, which was started in 1932.

Senile Patients.

During the year 1935, out of a total number of 446 death 138 were over the age of 70, and 235 were over the age of 6 On the other hand, between the age periods of 1 and 20, the were only 14 deaths.

The health of both the indoor and outdoor Staff has bee on the whole, good.

cases, and the number of beds occupied on the 31st December, 1935.

Classification of Wards.	Number of Wards.	BEDS.							
		MEN.		WOMEN.		CHILDREN (under 16 years of age).		Total.	
(1)	(2)	Provided (3)	Occupied (4)	Provided (5)	Occupied (6)	Provided (7)	Occupied (8)	Provided (9)	Occupied (10)
1. Medical ...	2	26	18	26	25	...	...	52	43
2. Surgical ...	2	31	19	28	17	...	...	59	36
3. Chronic sick *	5	112	53	56	53	...	...	168	106
4. Children ...	1	...	...	...	...	46	32	46	32
5. Venereal ...	2	32	10	15	4	5	1	52	15
6. Tuberculosis	2	31	17	14	8	...	...	45	25
7. Isolation ...	Nil	...	...	...	...	...	...	...	...
8. Maternity ...	1	...	...	8	5	...	...	8	5
9. Mental ...	...	6	...	6	...	...	...	12	...
Totals ...	15	238	117	153	112	51	33	442	262

* Patients needing hospital treatment because they are suffering from some chronic disease; also aged infirm persons whose medical and nursing needs approximate to those of chronic patients.

TABLE B.

Statistics relating to the year ended 31st December, 1935.

1.	Total number of admissions (including infants born in hospital)	2,534
2.	Number of women confined in hospital	160
3.	Number of live births	144
4.	Number of still births	16
5.	Number of deaths among the newly born (*i.e.*, under 4 weeks of age)	13
6.	Total number of deaths among children under one year (including those given under No. 5)	23
7.	Number of maternal deaths among women admitted to hospital for confinement	4
8.	Total number of deaths	446
9.	Total number of discharges (including infants born in hospital)	2,105
10.	Duration of stay of patients included in Nos. 8 and 9 above, whose stay was for the following periods—	
	(*a*) Under four weeks	1,839
	(*b*) Four weeks and under 13 weeks	471
	(*c*) Thirteen weeks or more	242
11.	Number of beds occupied during the year:— (a) Average, 271; (b) highest, 345, on 13th February, 1935; (c) lowest, 226, on 23rd September, 1935.	
12.	Number of surgical operations under general anæsthetic (excluding dental operations)	316
13.	Number of abdominal sections	99

Out-Patients.

During the year 1,969 patients passed through the X-ray Department, viz.:—

Chest cases	1,558
Orthopædic cases	411
	1,969

TABLE C.

Classification of In-Patients who were discharged from or who died in the Institution during the year ended 31st December, 1935.

DISEASE GROUPS.	Children (under 16 years of age).		Men and Women.	
	Discharged.	Died.	Discharged.	Died.
A. Acute infectious disease	51	2	46	13
B. Influenza	1	...	4	1
C. Tuberculosis—				
Pulmonary	10	1	118	48
Non-pulmonary	3	2	14	2
D. Malignant disease	...	...	28	67
E. Rheumatism—				
(1) Acute rheumatism (rheumatic fever) together with sub-acute rheumatism and chorea ...	4	...	8	1
(2) Non-articular manifestations of so-called "rheumatism" (muscular rheumatism, fibrositis, lumbago, and sciatica) ...	...	...	6	...
(3) Chronic arthritis	2	...	15	...
F. Venereal disease	5	...	100	8
G. Puerperal pyrexia	...	...	6	...
H. Puerperal fever—				
(*a*) Women confined in hospital ...	...	...	...	...
(*b*) Other cases	...	...	1	4
I. Other diseases and accidents connected with pregnancy and childbirth ...	...	...	86	6
J. Mental diseases—				
(*a*) Senile dementia...	...	...	5	...
(*b*) Other	...	...	16	...
K. Senile decay	...	...	11	21
L. Accidental injury	4	2	53	15
In respect of cases not included above—				
M. Disease of the Nervous System and Sense Organs ...	52	2	68	10
N. ,, ,, Respiratory System ...	358	6	139	28
O. ,, ,, Circulatory System ...	7	1	106	127
P. ,, ,, Digestive System ...	36	17	136	22
Q. ,, ,, Genito-urinary System	7	...	55	33
R. ,, ,, Skin	66	...	96	2
S. Other diseases	18	1	56	4
T. Mothers and infants discharged from maternity ward—				
Mothers	...	...	163	...
Infants	145	...	...	...
Totals	769	34	1336	412

TABLE D.

Classification of number of deaths occurring at the different age periods between 1st January and 31st December, 1935.

1.	Above 90 years of age	2
2.	Between 80 and 90 years	45
3.	,, 70 ,, 80 ,, ...	91
4.	,, 60 ,, 70 ,, ...	97
5.	,, 50 ,, 60 ,, ...	80
6.	,, 40 ,, 50 ,, ...	37
7.	,, 30 ,, 40 ,, ...	30
8.	,, 20 ,, 30 ,, ...	27
9.	,, 10 ,, 20 ,, ...	7
10.	,, 5 ,, 10 ,, ...	1
11.	,, 1 ,, 5 ,, ...	6
12.	Under 1 year	10
13.	,, 4 weeks	13
	Total ...	446

TABLE E.

Operations performed at the Borough Hospital from 1st January to 31st December, 1935.

1.	Abdominal sections (not including those under No. 4)	90
2.	Operations on Bones and Joints—	
	(a) Amputations	2
	(b) Other Operations on Bones and Joints ...	4
3.	Genito-urinary Operations	45
4.	Gynæcological Operations	61
5.	Operations on Ear, Nose, and Throat—	
	(a) Tonsils and Adenoids	312
	(b) Mastoids...	20
	(c) Miscellaneous	13
6.	Dental Operations	17
7.	Miscellaneous and minor Operations, including Skin grafts, incisions, and drainage of abscesses, etc....	72
	Total ...	636

ISOLATION HOSPITALS.

One thousand one hundred and eighty-two cases were admitted to the Isolation Hospitals during the year, compared with 1,616 for the year 1934, and 1,060 in 1933. The number admitted for 1935 included cases sent for observation and a few with double infection.

There was a decrease in the number of Scarlet Fever cases admitted, partly due to the greater number of Diphtheria cases admitted, and partly due to the fewer cases of Scarlet Fever notified during the year 1935, the admissions being: Scarlet Fever 202 and 505, and Diphtheria 716 and 692 for the years 1935 and 1934 respectively.

The following table shows the number and description of the cases admitted in each year since 1926 :—

Disease Admitted.	1926	1927	1928	1929	1930	1931	1932	1933	1934	1935
Small Pox	—	1	4	—	*1	—	1	—	—	—
Scarlet Fever	220	354	252	320	303	180	142	440	505	206
Diphtheria	321	250	311	373	418	230	214	274	692	717
Scarlet Fever and Diphtheria ...	3	1	3	—	1	3	3	3	1	17
Enteric Fever	16	21	39	19	24	11	15	11	13	19
Tuberculosis	208	216	213	224	222	178	197	152	186	159
Cerebro-Spinal Fever	3	2	1	2	4	4	10	12	2	—
Measles and German Measles ...	90	68	45	74	65	6	66	24	64	12
Chicken Pox	64	19	37	25	11	22	3	18	46	28
Mumps	13	8	7	12	2	3	5	7	47	3
Erysipelas	—	—	—	2	—	2	24	36	25	8
Pneumonia...	—	—	—	—	—	—	9	30	—	2
Influenza	—	—	—	—	—	—	14	34	—	—
Encephalitis Lethargica	1	1	—	1	—	—	2	—	—	1
Whooping Cough	—	—	—	—	—	1	30	11	30	3
Poliomyelitis	—	—	—	—	—	—	3	4	2	1
Other Diseases	2	6	5	14	4	3	8	4	3	6
Totals	941	947	917	1066	1055	643	746	1060	1616	1182

* For observation.

ISOLATION HOSPITALS.

Cases Isolated for Treatment during the Year 1935.

This Table shows all admissions to the Isolation Hospital, and Millbrook Marsh Hospital, and includes all Cases admitted from Vessels in the Port, Cases admitted from neighbouring Districts, and Naval and Military Cases.

Disease Notified or Suspected.	Cases Remaining in Hospital, 1st January, 1935.	Total number of Admissions.	Diagnosis confirmed.	Discharged	Died.	Remaining in Hospital, 31st Dec., 1935.	Average number of Days in Hospital (Cases treated to a Conclusion)	Case Mortality. Per cent.
Scarlet Fever	37	206	210	221	1	21	37.8	0.4
Scarlet Fever and Diphtheria ...	—	17	17	12	—	5	—	—
Scarlet Fever and Pneumonia ...	—	1	1	—	1	—	—	100.0
Diphtheria	160	717	704	759	31	87	43.2	4.3
Measles	1	12	11	12	—	1	18.3	—
Enteric Fever and Observation ...	—	19	12	16	—	3	38.2	—
Pulmonary Tuberculosis	—	159	159	108	4	47	102.7	—
Chicken Pox	1	28	28	29	—	—	32.8	—
Whooping Cough	—	3	2	3	—	—	12.4	—
Erysipelas	—	8	6	7	—	1	12.3	—
Parotitis	—	3	2	3	—	—	11.4	—
Encephalitis Lethargica	—	1	1	—	1	—	—	100.0
Anterior Poliomyelitis	—	1	1	1	—	—	—	—
Erysipelas and Whooping Cough ...	—	1	1	—	1	—	—	100.0
Pneumonia	—	2	1	—	1	—	—	50.0
Whooping Cough and Pneumonia ...	—	1	1	—	1	—	—	100.0
Observation	1	3	—	4	—	—	—	—
Totals	200	1182	1157	1175	41	166	—	—

The beginning of the year saw no abatement of the severe epidemic of Diphtheria, which continued to such an extent that the majority of beds in the Hospital and Small Pox Hospital were occupied by Diphtheria patients, only the absolute minimum of Scarlet Fever cases were admitted, and we were closed to all other diseases. Fortunately the epidemic died down, and towards the middle of April we were able to re-open for Scarlet Fever, Tuberculosis, and other diseases.

Towards the autumn again there was a marked rise in the number of Diphtheria admissions, but the epidemic, although severe, did not reach alarming heights—it was still of the " Gravis " type.

Two of the small wards were given over to Tuberculosis for the summer, as the waiting list had become so very long, owing to the closure of the wards.

The total number of admissions in the Hospital was 1,182, as compared with 1,616 in the previous year.

Scarlet Fever.

Two hundred and six cases of Scarlet Fever were admitted, as compared with 505 in the previous year ; these were of a very mild type as a whole, only one death taking place at this institution.

The complications, although fairly common, were not serious, only three Mastoid operations (one double and two single) being necessary.

Diphtheria.

Seven hundred and seventeen cases of Diphtheria were admitted, as compared with 692 in the previous year. The disease on the whole was still of the " Gravis " type—severe and dangerous, the majority being Faucial and Nasal. Fortunately there were very few Laryngeal cases, due perhaps to the climatic conditions and geographical situation.

Owing to the complications, the convalescence was very protracted, necessitating long periods in Hospital with great care.

The number of deaths was high—31. These deaths were mainly due to the fact that the doctor was not called in soon enough—the type being so very grave, they died very shortly after admission, within a few hours or days.

Four Laryngeal Diphtheria cases required the operation of Tracheotomy, of these patients two died. Two Mastoid operations (one single and one double) were necessary.

MEASLES.

Twelve cases of Measles were admitted ; it was not a severe form. There were no deaths.

ERYSIPELAS.

Only eight cases of this disease were admitted, owing to the lack of accommodation in the early part of the year.

ENTERIC FEVER.

Sixteen cases of Enteric Fever were admitted during the course of the year, together with three observation cases.

The following Table shows the districts from which cases were admitted during the year 1935 :—

Disease Notified or Suspected.	Boro'.	Port.	New Forest Rural.	Winchester Rural.	Romsey and Stockbridge Rural.	Romsey Boro'.	Other Districts.	Military Cases.	Total.
Scarlet Fever	172	10	21	2	—	1	—	—	206
Scarlet Fever and Diphtheria ...	16	—	—	—	—	—	—	1	17
Whooping Cough and Pneumonia...	1	—	—	—	—	—	—	—	1
Scarlet Fever and Pneumonia ...	1	—	—	—	—	—	—	—	1
Diphtheria	677	7	7	—	3	8	2	13	717
Measles	4	7	—	—	—	—	—	1	12
Enteric Fever	12	3	—	—	1	—	—	—	16
Enteric Fever Observation ...	—	3	—	—	—	—	—	—	3
Tuberculosis	159	—	—	—	—	—	—	—	159
Chicken Pox	24	3	—	—	—	—	—	1	28
Whooping Cough ...	3	—	—	—	—	—	—	—	3
Erysipelas	7	—	—	—	—	1	—	—	8
Erysipelas and Whooping Cough ...	1	—	—	—	—	—	—	—	1
Parotitis	1	1	—	—	—	—	—	1	3
Anterior Poliomyelitis	—	1	—	—	—	—	—	—	1
Encephalitis Lethargica	—	1	—	—	—	—	—	—	1
Pneumonia	2	—	—	—	—	—	—	—	2
Observation and other cases ...	—	3	—	—	—	—	—	—	3
Totals	1080	39	28	2	4	10	2	17	1182

Cases occurring among non-residents admitted to the Isolation Hospital from the Royal South Hants and Southampton Hospital and the Children's Hospital are included in the above table.

MUNICIPAL LABORATORIES.

The extensive investigations necessitated by such far-reaching schemes as come within the scope of a modern Public Health Department have been carried out during the year under review at the Municipal Laboratory, No. 23 East Park Terrace.

The figures appended show the amount of work done, and in particular the increase in Diphtheria swabs examined call for comment, as they were nearly 2,000 more than in any previous year, and about six times the average examined a few years ago.

Examinations of sputa under the Tuberculosis Scheme again showed high figures, although some 300 less than the previous high figures of 1934.

The work carried out in the Laboratory in connection with the Venereal Diseases Scheme showed a slight diminution from the year before, due, no doubt, to the fall in new patients, as described in the Venereal Diseases Report.

In addition to examining the specimens submitted by the General Practitioners, a great deal of work was again done on behalf of the Municipal Hospitals, while examinations of baths' water, milk, meat samples, shell fish, and various other food products further fulfilled the Laboratory's part in protecting the health of the community served.

The following is a summary of the work carried out during the year at the Bacteriological Laboratories, at No. 23 East Park Terrace, and at the Isolation Hospital.

Bacteriological Laboratory, Municipal Dispensary, 23 East Park Terrace.

Diphtheria—	
Specimens from Doctors	6,362
Sputa—	
Specimens from Doctors	511
T. B. Dispensary	710
Estimation of Albumen	269
Lowenstein-Jensen Cultural Test	21
Typhoid Group—	
Agglutination Test for T.A.B.	39
,, ,, ,, Abortus, Melintensis, Dysentery, etc. ...	8
Fæces	119
Blood Cultures	12

Cerebro-Spinal Fever—	
Cerebro-Spinal Fluid	13
Contact Swabs	12
Vincent's Angina—	
Smears	18
Ringworm—	
Specimens from Doctors	8
School Clinic	6
Urine Examinations—	
Full Examinations	302
Chemical	14
Gonorrhœa—	
Specimens from Doctors (Pus)	120
Urine Examinations	20
Smears	2,055
Pus	6
Syphilis—	
Wassermann Reactions	2,645
Cerebro-Spinal Fluid (Cell Count)	41
Cerebro-Spinal Fluid (Ross-Jones Test) ...	41
Dark Ground Examinations	68
Anæmias—	
Full Examinations	18
Films only examined	23
Miscellaneous Examinations—	
Examination of Milk (fresh and tinned) ...	40
Guinea Pig Inoculations	60
Analysis of Baths' Water	7
Other Examinations, including Smears from Rats—B. Pestis	92

Bacteriological Laboratory, Isolation Hospital.

The following Bacteriological Examinations were made at the Laboratory at the Isolation Hospital:—

Specimens from patients in Hospital ...	9,235
Number positive	1,213
Specimens submitted by medical practitioners	763
Number positive	87
Sputum examination of specimens ...	—
Cerebro-Spinal Fluid examinations ...	—
Blood Film examinations	—

A table, giving particulars of the pathological examinations made at the Municipal Laboratories, is given on page 110.

Mental Deficiency

and

Mental Treatment Clinic.

Southampton Mental Welfare Association.

PROVISION FOR THE CARE OF THE MENTALLY DEFECTIVE.

In order to make provision for the care and treatment of the mentally defective, the Local Authority combined with the County Council of Hampshire and the County Borough of Bournemouth to provide Institutions for this purpose.

The Joint Agreement, dated the 12th June, 1931, also provided for mental hospital accommodation for persons coming within the scope of the Lunacy Acts. The Institutions thus being controlled by a Committee appointed proportionately from each body gives a distinct advantage to patients over the conditions existing before the provision of training Colonies under the Mental Deficiency Acts, inasmuch as patients, if found suitable, may by an Order made under the Mental Deficiency Acts, 1913–27, be transferred to one of the training Colonies instituted under the Acts.

There are at present two training Colonies provided for the reception of mentally defectives coming within the scope of the Acts of 1913–27, one—Coldeast Colony, Sarisbury Green, and the other—Tatchbury Mount Colony, Totton, both situated in the County of Hampshire.

The Coldeast Colony has been developed primarily for female patients, and young children, and provides accommodation for 500 beds.

The Tatchbury Mount Colony has been set aside for male patients over the age of sixteen years. It originally consisted of 60 beds in the main buildings. During the year the erection of two villas, each giving accommodation for 60 patients, have been under course of erection, and these will be ready for occupation at the beginning of the new year.

Of the total number of beds provided in the two Institutions 6/10ths are allocated to the Hampshire County Council, 3/10ths to the County Borough of Southampton, and 1/10th to the County Borough of Bournemouth, this being proportionate to the population of each area.

During the year 1935 petitions were presented for Orders under the Mental Deficiency Acts in respect of 14 defectives seven being males and seven females ; of whom 13 were classified

as feeble-minded and one imbecile. These were admitted to the Colonies as under :—

Coldeast Colony	3	males.
	7	females.
Tatchbury Mount Colony ...	4	males.

No cases have been placed under guardianship during the year, but in three cases prolonged leave of absence on licence was granted. Two patients on licence were re-admitted to Institutions.

The following is a summary of patients for whom the Local Authority is responsible in Institutions, under guardianship or on licence, at the end of year :—

In Institutions.

Coldeast Colony.		
Males over 16 years	16	
Males under 16 years	16	
Females over 16 years	55	
Females under 16 years	7	
	—	94
Tatchbury Mount Colony.		
Males over 16 years		26

Under Guardianship.

Brighton Guardianship Society.		
Males	4	
Females	5	
	—	9

Under Licence.

To care of parent or other approved person.		
Males	6	
Females	2	
	—	8

During the year two males and ten females were recommended for statutory supervision and placed under the care of the Southampton Mental Welfare Association, who carry out this work on behalf of the Local Authority. Of these, two males and four females were referred to the Mental Deficiency Acts Committee of the Local Education Authority.

The number under statutory and voluntary supervision at the end of the year was :—

Statutory Supervision.		
Males	62	
Females	69	
	—	131
Voluntary Supervision.		
Males	106	
Females	146	
	—	252

Training.

The male patients at the respective Institutions receive training in gardening, farming, carpentry, boot-making, etc., and the female patients in useful work, such as needlework and other suitable domestic work, having regard to the capabilities of the defective as defined by the Medical Superintendent.

Cases on Licence.

Patients are not recommended for prolonged leave of absence on licence, until most careful enquiries have been made in regard to the home conditions, and what care and supervision will be available for the protection of the defective whilst on licence, as it is no easy matter to find suitable employment for defectives.

SOUTHAMPTON MENTAL WELFARE ASSOCIATION.

The Southampton Mental Welfare Association, founded in 1928, had on its books at the end of its first year 595 cases; up-to-date statistics record its handling of over 1,600 in the past eight years. Judged solely by the increase in figures, the conclusion arrived at might well be alarming, but there is no reason to believe that the incidence of mental deficiency in the community is greater now than at any other time in the history of the race. There is reason, however, consolidated by actual proof, to believe that the plight of the mentally deficient person is more widely and sympathetically considered now than at any other time. Acts of Parliament afford him an adequate and special protection; societies have been founded for his particular care, and, finally—and, perhaps, most importantly—the problem he presents is meeting with an ever-widening and more active interest in the public mind, which formerly ignored him, or accorded him only indifference.

The Association is directed by an Executive Council of eighteen members, including representatives of the Southampton Mental Deficiency Acts Committee, the Southampton Education Committee, the local Public Assistance Committee, Infant Welfare Centres, National Society for the Prevention of Cruelty to Children, University College, and three co-opted members. The Clerk to the Mental Deficiency Acts Committee, the Medical Officer of Health, and the Secretary to the Education Committee are members *ex-officio*.

The scope of the work done by this Association is best realised by a recapitulation of the objects it had in view at its inception, which, extended to cover growing needs, now stand as follows:—

1. (*a*) To assist the Local Authority in its Statutory Duties of Ascertainment and Supervision of Mental Defectives in their own homes.
   (*b*) To provide Occupation Centres, Training Centres, and Home Teachers.
   (*c*) To visit and supervise Defectives with Leave on Licence from Institutions.
   (*d*) To report on the homes of Defectives, when orders are due for renewal.
   (*e*) To assist in finding vacancies in Institutions and in finding Guardians.
   (*f*) To convey Defectives to Institutions or Guardians.

2. To assist the Education Committee in regard to educable mentally defective children :—

   (*a*) To visit defective children in schools, and in their own homes.

   (*b*) To report on home circumstances and family history before defective children are due to leave school.

   (*c*) To assist in finding employment for Defectives under the age of 18 years.

   (*d*) To advise the parents of children of ages 5 to 7 (or occasionally older) who are not in school, but whose mental condition is under observation, and who are not yet classified.

   (*e*) To provide simple handicrafts for children under Group (*c*) who are incapable of or unable to secure work on leaving school.

3. To assist the Public Assistance Committee :—

   (*a*) To visit Defectives of all ages in receipt of Out-relief.

   (*b*) To visit Defectives who have been discharged from Public Assistance Institutions.

   (*c*) To organise training and occupation for Defectives on Out-relief.

4. Voluntary Work.—To advise and assist, and also befriend, all Defectives in the area who are at present not "subject to be dealt with" under the Mental Deficiency Acts, particularly the following :—

   (*a*) Young defective children, who are under school age, in whose case it is of great importance that advice should be given to the mothers as to methods of training.

   (*b*) Adult Defectives who would benefit by friendly visiting and the provision of training in handicrafts.

   (*c*) Defectives who have been discharged from Institutions and who are in need of friendly supervision.

   (*d*) Defective women who have immoral tendencies, or who have given birth to illegitimate children, but whose circumstances are not such as to enable action to be taken at once under the Mental Deficiency Acts.

5. To advise and assist persons who are not certifiable under either the Mental Deficiency Acts, or the Lunacy Acts, but who are unstable or unbalanced, and are giving anxiety to parents and friends.

6. To keep a register of all Defectives in the County Borough.

7. To visit and report on the home conditions of patients attending the Psychological Clinic.

8. To visit and report, if desired, on patients discharged from Mental Hospitals.

Trained social workers are employed for the fulfilment of these aims, each having particular districts in which homes are visited at regular intervals, the information elicited from these friendly—and usually well-received—visits forming the basis of

the detailed reports furnished to the Medical Officer of Health, the School Medical Officer, and the Secretary for Education. During the past year 2,868 visits were paid by the Staff, and 1,020 reports sent to these officials of the Authority.

Such a brief summary would not be complete without a final reference to the work done in the Occupation Centre run by this Association. At this Centre ineducable children are received and trained in handicrafts, simple general knowledge, elementary hygiene, speech training (by means of singing and poetry), dancing, eurhythmics, and physical training. Unemployable adult mentally defective persons are also on the registers of the Centre, where they are given tuition in such simple manual work as rug-making, chair-caning, weaving, etc., receiving a small payment when their work finds a sale. The psychological effect of training and skilled attention is inestimable both in the children and adults, while regular medical examination and the provision of a large mid-day meal (given free when necessary) similarly results in a gratifying change in the poor physique with which mental deficiency is so often allied.

MENTAL TREATMENT ACT, 1930.

This Act, which came into operation on the 1st January, 1931, is designed to bring within the range of treatment cases in the earliest stages of mental illness. The Act is largely based on the findings of the Royal Commission, and the main principles embodied in it may be summarised as follow :—

(1) The preventive treatment of incipient mental illness by the provision of Out-Patient Clinics, and extended facilities for voluntary treatment.

(2) To assimilate the treatment of mental illness to that of other forms of illness by—

(*a*) Provision under which certain cases may be temporarily placed under care and treatment without certification.

(*b*) The opportunities afforded by associating the General Hospitals (Municipal and Voluntary) in the treatment of mental illness.

(3) Extended provision for after care, and for systematised research into mental illness.

(4) Dissociation of the treatment of mental illness from the Poor Law.

(5) Various alterations in terminology, reflecting the more enlightened view now taken in regard to mental illness.

The duties and powers of a Local Authority include :—

(1) To investigate the needs of their area, and to take such steps as they think necessary to provide and maintain suitable accommodation for the reception of temporary patients.

(2) To provide Out-Patient Clinics for treatment either gratuitously, or on such terms as they think fit, of persons suffering from mental illness.

(3) To make provision for after-care of patients who have undergone treatment, and to contribute to the funds of Voluntary Associations formed for that purpose.

(4) To undertake research, and to make contributions towards bodies engaged in research in relation to mental illness and treatment.

Section I of the Act provides that any person who is desirous of voluntarily submitting himself to treatment for mental illness and who makes an application in writing for the purpose to the person in charge of an Institution, may, without a Reception Order, be received as a voluntary patient into any Hospital

Nursing Home, or place approved by the Board of Control. In the case of minors under the age of 16 years, a medical recommendation by an approved medical practitioner is required.

Section 5 of the Act provides that a person who is suffering from mental illness and is likely to benefit by temporary treatment, but is for the time being incapable of expressing himself as willing or unwilling to receive such treatment may, on the written application of the husband or wife, or by a relative of the person to whom it relates, or, on the request of the husband or wife or a relative, by a duly authorised officer of the Local Authority, be received as a temporary patient for the purpose of treatment.

An application for temporary treatment of a patient under Section 5 must be accompanied by a recommendation signed by two medical practitioners, one of whom must be approved by the Board of Control, and the other must be the usual medical attendant of the patient.

A Mental Treatment Clinic is held weekly at the Vicarage, East Park Terrace, on Mondays, at which a Mental Specialist from Knowle Mental Hospital is in attendance.

During the year 90 new patients attended the Clinic, the total attendances of new and old patients being 566.

The following table shows the number of "Voluntary" patients treated at Knowle Mental Hospital during the year. No "Temporary" patients were admitted.

	Males.	Females.	Total.
Cases remaining in Hospital, 31st December, 1934 ...	3	3	6
Admitted	16	13	29
Discharged :			
Recovered	2	3	5
Relieved	5	4	9
Not improved	2	3	5
Died	1	—	1
Remaining in Hospital, 31st December, 1935	9	6	15

Miscellaneous.

THE CHILDREN AND YOUNG PERSONS ACTS, 1908–1932.

The Local Government Act placed the functions under Part I (Infant Life Protection) of the Children Act, 1908, under the administration of the Public Health Authority. These duties had previously been carried out by the Board of Guardians. Part I of the Children Act, 1908, was amended by Part V and Schedule 2 of the Children and Young Persons Act, 1932. Part V of the Act of 1932 was by an Order of the Secretary of State brought into operation on the 1st January, 1933. Part I of the 1908 Act has not been repealed by, nor included in the consolidation Act, 1933, consequently the part of the 1908 Act not repealed by Part V of the 1932 Act is still on the Statute Book, together with Sections 65 to 69 of the Children and Young Persons Act, 1932, and those parts of Schedule 2 which refer to the Children Act, 1908. The changes brought about by the 1932 Act are as follow :—

The ages under which the reception of children for reward must be registered has been extended from 7 to 9 years.

The period of notification of the reception of the child, instead of being within 48 hours under the Act of 1908, has been amended as follows :—

(*a*) In the case of the first child proposed to be received, not less than seven days before its reception.

(*b*) In the case of any other child, not less than 48 hours before reception.

(*c*) In the case of a child already received without reward within 48 hours after the undertaking to receive for reward.

Notification of change of residence is also increased from 48 hours to at least seven days prior to the change. Notification of the death or transfer of the child, instead of being given within 48 hours, must now be given within 24 hours.

Power is also given to enable the advice and direction of the Infant Life Protection Visitor to extend not only to the nursing, but also to the general health and well being of the child.

The Authority is empowered to limit the number of children in a foster-home, and enables them to impose conditions so long as the total number of children kept in the dwelling exceeds the specified number.

The powers of the Authority to secure the removal of children kept on unsuitable premises, or by unsuitable persons, are extended to prevent their reception in such premises, or by such persons.

The class of persons described as unfit to have care of such children is also extended to cover unfitness by reason of old age, infirmity, or ill-health.

The duties of the Local Authority are the ascertainment of all persons receiving children for reward ; to satisfy themselves that proper nursing and maintenance is provided ; to carry out the proper inspection of houses in which children are kept, and of persons under whose care they are placed ; to keep a register of persons giving notice under the Act, and to give notice of all children removed to another district.

The following gives particulars relating to work under the Acts at the end of the year, 1935 :—

Number of persons on the Register	...	...	85
Number of children in their care	...	...	111
Number registered during the year	...	...	69
Number removed from the Register	...	...	49
Number of deaths during the year	...	...	2

VACCINATION.

The whole of the duties under the Vaccination Acts, together with all officers engaged in the work, were transferred to the Health Department in accordance with Section 2 of the Local Government Act, 1929.

The Borough is divided into nine vaccination districts, a Public Vaccinator (doctor) being appointed to each district, with the exception of districts Nos. 3 and 4 which are combined. Separate Public Vaccinators are also appointed for the St. Mary Street Institution, Borough Hospital, and Children's Homes. There are three Vaccination Officers appointed, each having a separate district.

The following table is a record of the Vaccinations carried out in Southampton since 1913 :—

Year.	Births.	Successfully Vaccinated.	Died Unvaccinated.	Insusceptible to Vaccination.	Declarations of Conscientious objection	Postponed and whereabouts unknown or removed to other districts.	Percentage successfully Vaccinated.
1913	2886	1364	187	6	1055	274	47.3
1914	2972	1294	209	7	1176	286	43.5
1915	2559	1230	157	8	961	203	48.1
1916	2773	1243	189	6	1083	252	44.8
1917	2430	1057	161	3	983	226	43.5
1918	2532	1002	172	12	1000	346	39.6
1919	2565	1062	157	10	1034	302	41.4
1920	3210	1283	165	8	1413	341	40.0
1921	†2871	1117	155	14	1320	265	38.9
1922	†2601	1082	148	9	1161	201	41.6
1923	†2474	1231	113	4	905	221	49.8
1924	3166	1502	163	7	1202	292	47.4
1925	3262	1440	156	4	1401	261	44.1
1926	3153	1354	139	11	1373	276	42.9
1927	3003	1283	125	15	1317	263	42.7
1928	3096	1391	113	9	1398	185	44.9
1929	3145	1311	147	19	1499	169	41.7
1930	3205	1466	146	7	1514	182	42.1
1931	3073	1370	110	9	1433	151	44.5
1932	3081	1338	122	11	1431	179	43.4
1933	2917	1203	135	11	1404	164	41.2
1934	2837	1197	116	11	1408	105	42.2
1935	2779	1498	*	*	1346‡	*	*

* Figures not available. † Old Borough only.

‡ These figures do not relate to the births registered in 1935, but are the numbers of certificates of successful primary vaccination of children under 14, and declarations of conscientious objection actually received in 1935, irrespective of the dates of birth of the children to whom they relate.

SOUTHAMPTON CREMATORIUM.

The following particulars have been kindly supplied by the Registrar of Cemeteries and Crematorium regarding the use of the Crematorium for the year ended December, 1935 :—

During the past year there was an increase in the number of cremations, 359 having been cremated, against 299 in the previous year, an increase of 60 during the year.

The eight tablets fixed on the wall of the Chapel have a neat appearance, and are greatly admired by the persons responsible for their erection.

The aged persons of 70 and over cremated are still larger in proportion to other ages, 159 having been cremated in 1935, being 44.3% of the year's Cremations, and from July, 1932, to December, 1935, the number was 417, being 44.9% of the Cremations carried out at the Southampton Crematorium.

During the past year 58 deceased persons belonging to Southampton were cremated, being 16.1% of the 359 Cremations, and a decrease of 14 on the previous year.

For the whole period the Crematorium has been in operation 179 persons belonging to Southampton were cremated, a percentage of 19.3 of the total number.

The number of Cremations during 1935 carried out by the Crematoria in Great Britain has not been ascertained at this date.

Scattering as a method of disposal of ashes is the usual practice as last year, 67.1% of the remains after Cremations were scattered.

Appended are statistics on Districts, Ages, Disposals, and Sexes.

COMPARISON OF DISTRICTS TABLE.

	1932.	1933.	1934.	1935.	1932–1935. July–Dec.
Southampton	18	31	72	58	179
Bournemouth	22	60	76	103	261
Portsmouth	11	30	44	56	141
Hants	13	40	68	90	211
Dorset	13	25	31	38	107
Wilts (including Salisbury)	—	7	5	10	22
Devon	—	—	1	—	1
Bristol	—	—	1	—	1
London	—	—	1	1	2
Chichester	—	—	—	1	1
Oxford	—	—	—	1	1
Somerset	—	—	—	1	1
	77	193	299	359	928

AGES TABLE.

	1932.	1933.	1934.	1935.	1932–1935. July–Dec.	Per Cent.
Still-borns	1	—	—	—	1	.11
Males and Females—						
20 years and under	4	4	9	4	21	2.26
21 ,, to 50 ...	8	22	39	36	105	11.31
51 ,, to 70 ...	35	75	114	160	384	41.39
71 ,, and over	29	92	137	159	417	44.93
	77	193	299	359	928	

DISPOSAL OF REMAINS TABLE.

	1932.	1933.	1934.	1935.	1932–1935. July–Dec.
Taken away by friends	22	65	107	99	293
Deposited in Columbarium	5	5	2	10	22
Scattered in Garden ...	47	118	180	241	586
Buried in Southampton Cemeteries ...	2	2	4	5	13
Waiting Instructions...	1	3	6	4	14
	77	193	299	359	928

SEX TABLE.

	1932.	1933.	1934.	1935.	1932–1935. July–Dec.
Within the Borough—					
Males	10	13	40	42	105
Females	8	18	29	16	71
Without the Borough—					
Males	29	79	124	157	389
Females	30	83	106	144	363
	77	193	299	359	928

Males 494. Females 434.

Housing.

HOUSING.

OFFICIAL REPRESENTATIONS.

Official representations were made during the year concerning nine unhealthy areas, which were inspected by the Housing Committee, and declared by the Council to be Clearance Areas :—

(1.) Spa Road Clearance Area.

This area includes 5 houses, viz., Nos. 1, 2, 3, 4, and 5 Spa Road. The number of persons who will be displaced and require to be rehoused is 17.

(2.) Cossack Street Clearance Area.

This area includes 5 houses, viz., Nos. 28, 29, and 30 Cossack Street ; and 38 and 39 Craven Street. The number of persons who will be displaced and require to be rehoused is 22.

(3.) Cossack Place Clearance Area.

This area includes 6 houses, viz., Nos. 1, 2, 3, 4, and 5 Cossack Place ; and 39 Winton Street. The number of persons who will be displaced and require to be rehoused is 28.

(4.) Middleton Street Clearance Area.

This area includes 4 houses, viz., Nos. 22 and 23 Middleton Street ; and 1 and 2 Broomfield Court. The number of persons who will be displaced and require to be rehoused is 9.

(5.) Craven Street Clearance Area.

This area includes 24 houses, viz., Nos. 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, and 66 Craven Street ; and 1, 7, 8, and 9 Nightingale Court.

(6.) Johnson Street Clearance Area.

This area includes 16 houses, viz., Nos. 22, 23, 24, 25, 26, 27, 28, and 29 Johnson Street ; 19, 20, 21, 22, and 23 Cross Street ; and 6½, 7½, and 8½ Winton Street. The number of persons who will be displaced and require to be rehoused is 57.

(7.) Station Road Clearance Area.

This area includes 4 houses, viz., Nos. 67, 68, 69, and 70 Station Road. The number of persons who will be displaced and require to be rehoused is 18.

(8.) Stoneham Lane Clearance Area.

This area includes 5 houses, viz., Nos. 73, 74, 75, 76, and 77 Stoneham Lane. The number of persons who will be displaced and require to be rehoused is 27.

(9.) New Court Clearance Area.

This area includes 6 houses, viz., Nos. 1, 2, 3, 4, 5, and 6 New Court. The number of persons who will be displaced and require to be rehoused is 10.

Extensive progress was made during the year with the Council's Housing programme. Twenty-nine areas were dealt with as Clearance Areas, involving 187 houses.

(A.)—CLEARANCE AREAS.

No objections were received from the owners in respect of the following Clearance Orders :—

(1.) The Southampton (Lime Street) Clearance Order, 1934.

This area comprises 2 houses and 2 water-closets. The only available water supply was from a common tap, situated in the court. Both houses were without through ventilation or yards, with the exception of a small courtyard ; one house was back to back. This area was declared to be a Clearance Area on the 18th October, 1933. A Clearance Order was made on the 19th December, 1934, and confirmed on the 25th June, 1935, without modification. None of the displaced persons availed themselves of the alternative accommodation at Coxford, and all the houses were demolished 23rd December, 1935.

(2.) The Southampton (Orchard Lane) Clearance Order, 1935.

This area comprised 6 houses.

Of the 6 houses in the area 3 were void.

The area was declared to be a Clearance Area on the 18th October, 1933. A Clearance Order was made on the 20th February, 1935, and confirmed on the 25th June, 1935, with the following modification :—72 and 73 Orchard Lane, and No. 5 on plan, were excluded from the Order. Only one family accepted alternative accommodation at Coxford, and the houses were demolished in November, 1935.

(3.) The Southampton (Bannister Cottages) Clearance Order, 1934.

This area comprised 4 houses and 4 water-closets. The court was approached from Bannister Street, and air space at the front was limited to 12 feet, causing darkness to the houses.

This area was declared a Clearance Area on the 18th July, 1934. A Clearance Order was made on the 19th December, 1934, and confirmed on the 25th June, 1935, without modification.

Four families availed themselves of alternative accommodation at Coxford, and the houses were demolished September, 1935.

(4.) The Southampton (Salisbury Street) Clearance Order, 1935.

This area comprised 2 houses and 2 water-closets with very small yards, and narrow street ; both being damp and dilapidated.

The area was declared to be a Clearance Area on the 19th September, 1934. A Clearance Order was made on the 15th January, 1935, and confirmed on the 25th June, 1935, without modification. One family accepted accommodation at Coxford.

(5.) The Southampton (Davies Road) Clearance Order, 1935. No. 4.

This area comprised 3 houses, situated on open land, at the end of a narrow lane leading from Davies Road. Two of the houses were of wood framing, with lath and plaster walls, and with thatched roofs. One was brick-built with tiled roof, and back to back ; all were damp and dilapidated.

The area was declared to be a Clearance Area on the 19th September, 1934. A Clearance Order was made on the 16th January, 1935, and confirmed on the 25th June, 1935, without modification. Two families availed themselves of alternative accommodation at Coxford.

(6.) The Southampton (Oriental Terrace) Clearance Order, 1935.

This area comprised 17 houses situate in a lane running between High Street and Back-of-the-Walls. Air space was restricted and darkness caused by the closeness of buildings at front and rear.

This area was declared a Clearance Area on the 19th December, 1934. A Clearance Order was made on the 17th April, 1935, and confirmed on the 4th September, 1935, without modification. Seventeen displaced families availed themselves of alternative accommodation at Coxford, and the houses in the area were demolished 30th December, 1935.

(7.) The Southampton (Spa Road) Clearance Order, 1935.

This area comprised 5 houses situated in Spa Road. Two of the houses were becoming dangerous structures. Yard space in each house was restricted, and the houses were overshadowed by the proximity of high buildings.

The area was declared a Clearance Area on the 16th January, 1935. A Clearance Order made on the 17th April, 1935, and confirmed on the 4th September, 1935, without modification.

Two families availed themselves of alternative accommodation offered, and all the houses were demolished by the 29th February, 1936.

(8.) The Southampton (Botany Bay) Clearance Order, 1935.

This area formed an irregular group of 8 houses. Several of them being back to back, and others without through ventilation. They were constructed in part of clay, pebbles, and wood, with some roofs of slate, others of corrugated iron, and, in some instances, tarred felt.

This area was declared a Clearance Area on the 19th December, 1934. A Clearance Order made on the 17th July, 1935, and confirmed on the 29th October, 1935, without modification.

(9.) The Southampton (Cossack Street) Clearance Order, 1935.

This area comprised 5 houses, each without through ventilation on the first floor. All the houses were damp.

This area was declared a Clearance Area on the 16th January, 1935. A Clearance Order made on the 17th April, 1935, and confirmed on the 4th September, 1935, without modification.

Three families availed themselves of the alternative accommodation offered at Coxford, and one family to a Council house on the Freshfield Estate.

(10.) The Southampton (Cossack Place) Clearance Order, 1935.

This area comprised 6 houses and 5 water-closets. All of the houses were without through ventilation. The only available water supply was from a common tap in the court, and slop water had to be thrown down gulley in court.

This area was declared a Clearance Area on the 16th January, 1935. A Clearance Order made on the 17th April, 1935, and confirmed on the 4th September, 1935, without modification.

Four families availed themselves of alternative accommodation at Coxford, and the houses were demolished 31st December, 1935.

(B.)—OPPOSED CLEARANCE ORDERS.

(11.) Southampton (Union Court) Clearance Order, 1935.

This area comprised 4 houses, 3 of the houses shared a common tap, water-closet, and small yard, and without facilities for washing. All the houses were grossly damp, and without through ventilation on the first floor.

This area was declared a Clearance Area on the 18th October, 1933, and a Clearance Order made on the 20th February, 1935. A Ministry of Health Inquiry was held on the 20th June, 1935, and the Order was confirmed on the 4th September, 1935, without modification.

Two families availed themselves of the alternative accommodation at Coxford, and all the houses were demolished by December, 1935.

(12.) Southampton (Lower Bannister Street) Clearance Order, 1935.

This area comprised 3 houses, all of which were back to back. Yard space was restricted, and the water supply shared. All the houses were damp.

The area was declared a Clearance Area on the 19th September, 1934, and a Clearance Order made on the 16th January, 1935. A Ministry of Health Inquiry was held on the 20th June, 1935, and the Order was confirmed on the 4th September, 1935, without modification.

All the families availed themselves of the alternative accommodation at Coxford.

(13.) Southampton (Smith's Quay) Clearance Order, 1935.

This area comprised 3 houses, 2 water-closets, and 1 washplace. The houses formed part of one large building, which had been converted into separate dwellings. All the houses were without through ventilation on the first and second floor, and the water supply consisted of one tap in the yard.

The area was declared a Clearance Area on the 19th September, 1934, and an Order made on the 20th February, 1935. A Ministry of Health Inquiry was held on the 20th June, 1935, and the Order was confirmed on the 4th September, 1935, without modification.

Two families availed themselves of alternative accommodation at Coxford.

(14.) Southampton (Stoneham Lane) Clearance Order, 1935.

This area comprised 5 houses, all of which were undrained. Two were thatched cottages with bulging walls and gross settlement. Three formed what had apparently been an old farmhouse. All the houses were damp and the walls bulging. None of the first floor rooms had through ventilation.

The area was declared a Clearance Area on the 16th January, 1935, and a Clearance Order made on the 17th April, 1935. A Ministry of Health Inquiry was held on the 20th June, 1935, and the Order was confirmed on the 4th September, 1935, without modification.

Two families availed themselves of alternative accommodation at Coxford.

(15.) Southampton (Middleton Street) Clearance Order, 1935.

This area consisted of 4 houses. Two of which were situated in Broomfield Court; these were without through ventilation. The only available water supply for all the houses was from a common tap situated in the court. All the houses were damp and the structures decayed.

The area was declared to be a Clearance Area on the 16th January, 1935, and a Clearance Order made on the 17th April, 1935. A Ministry of Health Inquiry was held on the 20th June, 1935, and the Order was confirmed on the 4th September, 1935, without modification.

Three families availed themselves of alternative accommodation at Coxford.

(16.) Southampton (Pear Tree Green) Clearance Order, 1935.

This area consisted of 4 houses and 2 water-closets. Two of the houses were back to back, and all the houses were damp and in an advanced state of dis-repair.

The area was declared to be a Clearance Area on the 19th September, 1934, and a Clearance Order made on the 16th January, 1935. A Ministry of Health Inquiry was held on the 20th June, 1935, and the Order confirmed on the 4th September, 1935, without modification.

None of the displaced families elected to avail themselves of accommodation at Coxford.

(17.) Southampton (Station Road) Clearance Order, 1935.

This area consisted of 4 houses. All the houses were damp, with bulging and fractured walls. One house was without through ventilation, and the water supply for the four houses was from one tap. The W.C.s were 44 feet from the houses.

The area was declared to be a Clearance Area on the 16th January, 1935, and a Clearance Order made on the 17th April, 1935. A Ministry of Health Inquiry was held on the 20th June, 1935, and the Order was confirmed on the 4th September, 1935, without modification.

Only one family availed themselves of alternative accommodation at Coxford.

(18.) Southampton (Davies Road, No. 1) Clearance Order, 1935.

This area comprised 5 houses, all of which were dilapidated and damp. The area was declared a Clearance Area on the 19th September, 1934. A Clearance Order made on 16th January, 1935. A Ministry of Health Inquiry held on the 20th June, 1935, and the Order was confirmed on the 4th September, 1935, without modification.

Three of the families availed themselves of alternative accommodation at Coxford.

(19.) Southampton (Davies Road, No. 2) Clearance Order, 1935.

This area comprised 2 houses, which were back to back, and damp.

The area was declared a Clearance Area on the 19th September, 1934. A Clearance Order made on the 20th February, 1935. A Ministry of Health Inquiry held on the 30th June, 1935, and the Order was confirmed on the 4th September, 1935, without modification.

Both families availed themselves of the alternative accommodation at Coxford.

(20.) Southampton (Davies Road, No. 3) Clearance Order, 1935.

This area comprised 2 houses, viz., 38 and 39 Davies Road, and 1 water-closet, both of which were grossly damp, without through ventilation, and below the ground level at the front about 4 inches, and 2 to 4 feet at the rear.

The area was declared a Clearance Area on the 19th September, 1934. A Clearance Order was made on 16th January, 1935. A Ministry of Health Inquiry held 20th June, 1935, and the Order was confirmed on the 4th September, 1935, without modification.

None of the displaced families availed themselves of the alternative accommodation provided.

(21.) Southampton (King Street) Clearance Order, 1935.

This area comprised 3 houses and 2 water-closets. They were overshadowed by high buildings 16 feet away. The whole structure was splaying, and showed evidence of decay. The rooms were dark and verminous.

The area was declared a Clearance Area on the 19th December, 1934. A Clearance Order was made on the 17th April, 1935. A Ministry of Health Inquiry was held on the 20th June, 1935, and the Order was confirmed on the 4th September, 1935, without modification.

None of the families displaced availed themselves of the alternative accommodation provided.

(22.) Southampton (New Court) Clearance Order, 1935.

This area comprised of a terrace of 6 two-roomed cottages, situated at the rear of the gardens of houses in Grove Street, and approached by a narrow passage, 75 feet long. All the houses were grossly damp, and without through ventilation on the first floor.

This area was declared a Clearance Area on the 1st February, 1935. A Clearance Order was made on the 19th June, 1935. A Ministry of Health Inquiry was held on the 27th August, 1935, and confirmed on the 29th October, 1935, without modification.

(23.) Southampton (Coleman Court) Clearance Order, 1934.

This area comprised 4 houses and 4 water-closets. Situate in a court, and approached by a narrow passage leading off Coleman Street.

All the houses were grossly damp, and the front walls were bulging owing to settlement.

This area was declared a Clearance Area on the 18th July, 1934. A Clearance Order was made on the 19th December, 1934. A Ministry of Health Inquiry was held on the 20th June, 1935, and confirmed on the 4th September, 1935, without modification.

None of the displaced tenants availed themselves of the accommodation provided.

(24.) Southampton (Southbrook Square) Clearance Order, 1934.

This area comprised 13 houses, 7 of which were situated in a court. Ten of the houses were below the level of the adjoining ground, and 3 without through ventilation. Five of the houses were without washing facilities.

All the houses were dilapidated, and showed evidence of gross dampness.

This area was declared a Clearance Area on the 18th July, 1934. A Clearance Order was made 19th December, 1934. A Ministry of Health Inquiry was held on the 20th June, 1935, and confirmed on the 4th September, 1935, without modification.

Twelve families availed themselves of the alternative accommodation at Coxford.

(25.) Southampton (Grove Street) Clearance Order, 1934.

This area comprised 10 houses, situate in 2 courts leading off Grove Street. Eight of the houses were back to back. The water supply was from 2 common taps, one in each court.

The houses were dark, damp and dilapidated, and the flooring of the ground floor rooms was below the court level.

This area was declared a Clearance Area on the 18th July, 1934. A Clearance Order was made 19th December, 1934. A Ministry of Health Inquiry held on the 20th June, 1935, and confirmed on the 4th September, 1935, without modification.

Two of the families availed themselves of the alternative accommodation at Coxford.

(26.) Southampton (Handford Place) Clearance Order, 1935.

This area comprised 2 houses, 2 wash-houses, and 2 water-closets. The houses were back to back with No. 12. The houses were grossly damp and below the street level.

The only open space within the curtilage was a small court, 8ft. wide, in front of the houses, and the free circulation of air was restricted by other buildings in the vicinity.

This area was declared a Clearance Area on the 19th September, 1934. A Clearance Order was made on the 16th January, 1935. A Ministry of Health Inquiry was held on the 20th June, 1935, and confirmed on the 4th September, 1935, without modification. All the buildings were demolished by November.

Both families availed themselves of the alternative accommodation at Coxford.

(27.) Southampton (Itchen Ferry) Clearance Order, 1935.

This area comprised 4 houses, two of which had become so dangerous that the occupants had to be displaced previous to the Inquiry. The walls of all the houses were bulging and damp.

The area was declared a Clearance Area on the 19th September, 1934. A Clearance Order made on 20th February, 1935. A Ministry of Health Inquiry held on the 20th June, 1935, and the Order was confirmed on the 4th September, 1935, without modification.

Only one family availed themselves of alternative accommodation at Coxford.

(C.)—COMPULSORY PURCHASE ORDERS.

In order to provide alternative accommodation in the centre part of the town, the following areas were dealt with by Compulsory Purchase Orders :—

(28.) Southampton (Johnson Street) Compulsory Purchase Order, 1935.

(*a*) The land within the Clearance Area comprised 16 houses, viz., Nos. 6½, 7½, and 8½ Winton Street ; Nos. 19, 20, 21, 22, and 23 Cross Street ; Nos. 22, 23, 24, 25, 26, 27, 28, and 29 Johnson Street.

Of the houses in the area, 3 were situated in the rear of other houses and without through ventilation ; the remaining houses were below the ground level at front, and without through ventilation on the first and second floors. All the houses were grossly damp, and generally dark and dilapidated, and all the rooms were under 7ft. 6in. in height.

This area was declared a Clearance Area 16th January, 1935.

(*b*) The following properties surrounding the area, not in themselves unfit, were included in the Compulsory Purchase Order, and comprised 9 houses, viz., Nos. 5, 6, 7, 8, 9, 10, and 11 Winton Street, Nos. 17 and 18 Cross Street, in order to secure an area of convenient shape and dimensions for rebuilding purposes.

Compulsory Purchase Order made on the 15th May, 1935. Ministry of Health Inquiry held on the 20th June, 1935, and the Order confirmed 4th September, 1935, without modification.

(29.) Southampton (Craven Street) Compulsory Purchase Order, 1935.

(*a*) The land within the Clearance Area comprised 24 houses, viz., Nos. 1, 7, 8, and 9 Nightingale Court ; Nos. 47, 48, 49, 50, 51, 52, 53, 54, 55, 56, 57, 58, 59, 60, 61, 62, 63, 64, 65, and 66 Craven Street.

All the houses in the area were grossly damp, with bulging walls and defective structures. Four were situated in a court.

This area was declared to be a Clearance Area 16th January, 1935.

(*b*) The following properties surrounding the area, not in themselves unfit, were included in the Compulsory Purchase Order, and comprised 2 houses, viz., Nos. 46 and 67 Craven Street, in order to secure an area of convenient shape and dimensions for rebuilding purposes.

Compulsory Purchase Order made on the 19th June, 1935. Ministry of Health Inquiry held on the 27th August, 1935, and confirmed 5th November, 1935, without modification.

———

It is a condition of the removal and the granting of a Council house, that no articles of furniture may be removed other than by us.

During the year the contents of 216 houses have been subjected to this procedure.

The following is a summary of houses completed for occupation from the date of the Armistice to the end of the year 1935:—

Year.	Erected by Council.	Erected by Private Enterprise.	Total.
1918 to date of Census, June, 1921	209	90	299
1921 June to end of year ...	232	112	344
1922	178	261	439
1923	50	383	433
1924	—	636	636
1925	—	821	821
1926	71	776	847
1927	437	568	1,005
1928	196	836	1,032
1929	644	896	1,540
1930	503	901	1,404
1931	614	712	1,326
1932	430	616	1,046
1933	118	732	850
1934	156	839	995
1935	202	873	1,075
	4,040	10,052	14,092

Total number of houses erected from 1918 to date of Census, 1921—299; since the Census—13,793.

Housing Statistics.

The following particulars are given in the form required by the Ministry of Health.

1. Inspection of dwelling-houses during the year :—

(1) (a) Total number of dwelling-houses inspected for housing defects (under the Public Health or Housing Acts) 4,441

(b) Number of inspections made for the purpose ... 8,937

(2) (a) Number of dwelling-houses (included under sub-head (1) above) which were inspected and recorded under the Housing (Consolidated) Regulations, 1925 169

(b) Number of inspections made for the purpose ... 651

(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation 42

(4) Number of dwelling-houses (exclusive of those referred to under the preceding sub-head) found not to be in all respects reasonably fit for human habitation 818

2. Remedy of Defects during the year without Service of formal Notices :—

Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their officers 108

3. Action under Statutory Powers during the year :—

A. Proceedings under Sections 17, 18, and 23 of the Housing Act, 1930 1

(1) Number of dwelling-houses in respect of which notices were served to carry out repairs ... nil

(2) Number of dwelling-houses which were rendered fit after Service of formal Notices :—

(a) By owners ... ... nil

(b) By Local Authority in default of owners nil

B. Proceedings under Public Health Acts :

(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied... 710

(2) Number of dwelling-houses in which defects were remedied after Service of formal Notices :—

(a) By owners 705

(b) By Local Authority in default of owners nil

C. Proceedings under Sections 19 and 21 of the Housing Act, 1930 :

(1) Number of dwelling-houses in respect of which Demolition Orders were made 42

(2) Number of dwelling-houses demolished in pursuance of Demolition Orders 38

D. Proceedings under Section 20 of the Housing Act, 1930 :

(1) Number of separate tenements or underground rooms in respect of which Closing Orders were made 1

(2) Number of separate tenements or underground rooms in respect of which Closing Orders were determined, the tenement or room having been rendered fit ... ... nil

E. Proceedings under Section 3 of the Housing Act, 1925 :

(1) Number of dwelling-houses in respect of which notices became operative requiring repairs ... nil

(2) Number of dwelling-houses which were rendered fit after Service of formal Notices :—

(a) By owners ... ... nil

(b) By Local Authority in default of owners nil

(3) Number of dwelling-houses in respect of which Closing Orders became operative in pursuance of declarations by owners of intention to close nil

F. Proceedings under Sections 11, 14, and 15 of the Housing Act, 1925 :

(1) Number of dwelling-houses in respect of which Closing Orders became operative ... ... nil

(2) Number of dwelling-houses in respect of which Closing Orders were determined, the dwelling-houses having been rendered fit ... ... nil

(3) Number of dwelling-houses in respect of which Demolition Orders became operative ... nil

(4) Number of dwelling-houses demolished in pursuance of Demolition Orders ... ... nil

DETAILED LIST OF INSPECTIONS MADE UNDER THE HOUSING ACT, 1925.

During the year 169 houses were inspected under the provisions of the above Act.

The following is a list of Roads, Streets, etc., in which systematic inspection was carried out, the number of houses inspected, and the number of notices served:

Street or Road.	Number of Houses Inspected.	Number of Notices served under Housing Act.	Number of Notices served under Public Health Acts.
Chantry Road (part of)	36	—	25
Condor Road	28	—	13
Guildford Street	29	—	17
Manor Farm Road (part of) ...	18	—	11
May Tree Road	14	—	2
Red Lion Cut	5	—	4
Sea Road	30	—	6
Victoria Road (part of)	9	—	1
Totals	169	—	79

Sanitary Services

and

Food and Drugs Acts.

SANITARY INSPECTION.

The following summary shows the particular work carried out under the various Acts administered by the Department, and nuisances abated during the year :—

General Inspection of Houses and re-visits	11,930
Inspections on Complaint	1,348
,, under the Housing Acts	169
Re-visits under the Housing Act	651
Inspections of Factories	97
,, of Workshops and Workplaces	1,406
,, of Laundries	145
,, of Bakehouses	580
,, under the Shops Act	3,985
,, of Slaughterhouses	3,629
,, of Butchers' Shops	1,737
,, of Sausage Factories	191
,, of Wholesale Stores, Markets, etc. ...	1,331
,, of Fish Shops	959
,, of Horse Flesh Shops	94
,, of Dairies, Cowsheds, and Milkshops ...	1,390
,, of Ice Cream Factories	217
,, of Common Lodging Houses	554
,, of Houses let in Lodgings	152
,, of Courts and Alleys	153
,, of Stables, Yards, Mews, etc.	46
Visits *re* Infectious Disease	1,185
Preliminary Notices served for the Abatement of Nuisances	710
Legal Notices served for the Abatement of Nuisances	75
Drains Tested with Smoke	20
,, Tested with Water	82
,, found Defective	13
Premises Drained to the Public Sewer	6
Drains cleared and repaired	225
,, reconstructed	24
,, retrapped	26
,, intercepted and ventilated from Sewer ...	15
Inspection chambers provided to house drains ...	19
New soil pipes fixed on external walls of houses ...	4
Ventilating shafts provided to house drains	29
Water-closets reconstructed	20
Urinals reconstructed and provided with means of flushing	1
New water-closet pans fixed	4

Water laid on to closets for flushing	56
Bath, sink wastepipes, etc., disconnected from drains	19
Sanitary sinks fixed in houses	30
Damp walls of houses remedied	226
Houses cleansed and whitewashed	238
Roofs of houses repaired	284
Eaves, guttering and stackpipes repaired	187
Window sashes made to open	18
Flooring, windows, etc., repaired	1,204
Yards paved and drained	10
Yard paving repaired	41
Sanitary dustbins provided to houses	229
Courts re-limewashed	12
Nuisances from keeping animals, etc., abated ...	4
Manure and offensive matter removed	31
Cesspools abolished	1
Privies abolished	1
Verminous premises cleansed	2

DISINFECTING STATION.

The following is a list of articles disinfected at the steam disinfector, West Quay :—

Beds and Mattresses	2,774
Bolsters and Pillows	6,359
Blankets and Quilts	6,852
Sheets	3,412
Counterpanes	1,777
Books	741
Sundries	15,358
Total	37,273

RATS AND MICE DESTRUCTION.

A total of 495 visits was made by the Sanitary Inspectors to farms, stores, refuse tips, and other places likely to be infested with rats, in connection with the duties imposed under the Rats and Mice (Destruction) Act, 1919.

The number of rats found and destroyed was 569.

NATIONAL "RAT WEEK."

The annual National "Rat Week" was held from 4th to 9th November, and the following methods were adopted for the extermination of rats :—

Advertisements were published in the local newspaper, drawing the attention of the public to their liability under the Rats and Mice (Destruction) Act for the destruction of rats and mice, and inviting any persons troubled by these pests to apply to the Health Department for advice and assistance ; many communications were received and investigated.

The Ministry of Agriculture and Fisheries bulletin on "Rat Extermination" was available to anyone seeking information, and a number of copies was distributed. A supply of poison biscuits was kept in the office, and a number of people supplied and instructed as to the most effective way of using them. Harbourages isolated from dwelling-houses, private refuse tips, dumps, and any other place where gassing could be carried out with safety, were gassed with cyanogas. As in previous years, with the co-operation of the Borough Engineer, poison baits have been laid in sewer manholes throughout the town.

I am confident that "Rat Week" has been a success. It is difficult to estimate the number of rats actually destroyed with baits, gassing, etc., but the number accounted for by trapping and found poisoned was 236.

MERCHANDISE MARKS ACT, 1926.

Four hundred and forty-two visits were made to shops, markets and hawkers' trucks, to see that the provisions of the Act were carried out.

DRAINAGE UNDER THE NEW BUILDING BYE-LAWS.

During the year 790 plans were submitted, of which 663 were approved and 127 disapproved.

The approved plans comprised :—

Dwelling-houses	1,764
Alterations	169
Miscellaneous buildings, shop fronts, etc.	255
Sewers, etc.	27

Work completed :—

Houses	873
Alterations	124
Miscellaneous buildings	114
New Streets	3
Number of inspections during progress of work ...	4,198
Number of drains tested and retested	1,735

WORK CARRIED OUT UNDER THE SOUTHAMPTON CORPORATION ACTS AND BYE-LAWS, RELATING TO THE DRAINAGE OF EXISTING BUILDINGS.

During the year 39 notifications were received with respect to the repair and alteration of drainage in compliance with Section 11 of the above Bye-laws.

The following works were carried out and supervised by the Department after notification :—

Premises drained to the public sewer	2
Drains reconstructed	7
,, cleared and repaired	21
,, ventilated	7
Intercepting traps fixed	8
Inspection chambers constructed	9
New pans fixed	11
New soil pipes fixed	5
Bath, sink wastepipes, etc., disconnected from drains...	8
New traps fixed	26
Sanitary sinks provided	2
Water-closets reconstructed	9
Water laid on to closets	5
Cesspool abolished	1
External light and ventilation provided to water-closets	1
Urinal constructed and provided with means for flushing	1
Privies abolished	1

OFFENSIVE TRADES.

The following offensive trades are carried on in the Borough : Gut Scraper 1, Tallow Melter 1, Tripe Boiler 1, Dealers in Rags, Bones, etc., 8, Fish Friers 51, Dealers in Animal Skins 2.

Bye-laws relating to offensive trades are in course of preparation.

SLAUGHTERHOUSES.

There are 7 Registered and 20 Licensed Slaughterhouses in the Borough; 3,629 visits were made, and the premises generally kept in a satisfactory condition.

During the year one Registered Slaughterhouse came within a Housing (Compulsory Purchase) Order and was demolished.

SLAUGHTER OF ANIMALS ACT, 1933.

Nine applications were received from persons engaged in the slaughter of animals for licences to slaughter or stun animals in accordance with the provisions of the above Act.

All the applications were granted on the payment of a fee of 2/–.

PUBLIC HEALTH MEAT REGULATIONS, 1925.

Two hundred and ninety carcases were marked in accordance with the provisions of the Regulations.

FOOD.

In carrying out the systematic inspection of food, the following visits were made to premises where food is prepared, stored, or sold :—

Slaughterhouses	3,629
Butchers' Shops	1,737
Sausage Factories	191
Wholesale Stores, Markets, etc. ...	1,331
Fish Shops	959
Ice Cream Factories	217

MEAT AFFECTED BY TUBERCULOSIS SEIZED OR SURRENDERED.

	In Slaughter-houses.	In Shops.	Weight.
*Carcases of Beef	45	—	25,353 lbs.
,, Pork	26	—	2,841 lbs.
Part carcases of Beef	50	—	7,218 lbs.
,, ,, Pork	171	—	2,675 lbs.

* Including one calf carcase found to be in a tubercular condition.

The following is a summary of the diseased and unsound food destroyed during the year :—

BEEF.

Forty-six whole Carcases, 56 Quarters, 125 Livers, 73 Lungs, 83 Offals, 46 Heads, 46 Tongues, 6 Hearts, 9 Skirts, 15 Mesenteries, 7 Kidneys, 5,803-lbs. sundry pieces of Beef.

Total weight of Beef, 48,920-lbs.

PORK.

Sixty-six whole Carcases, 176 part Carcases, 363 Plucks, 1,224-lbs. sundry pieces of Pork.

Total weight of Pork, 12,703-lbs.

MUTTON AND LAMB.

Twelve whole Carcases, 23 Plucks, 44-lbs. sundry pieces of Mutton.

Total weight of Mutton, 522-lbs.

VEAL.

Three whole Carcases, 3 Offals, 442-lbs. sundry pieces of Veal.

Total weight of Veal, 681-lbs.

FISH.

One hundred and seventy-eight boxes of Fillets, 226 boxes of Kippers, 62 boxes of Haddock, 107 stone of Herrings, 100 stone of Roes, 96 stone of plaice, 7 stone of Witches, 27 boxes of Codling, 36 stone of Soles, 325 stone of Codfish, 123 stone of Mixed Fish, 17 stone of Whiting, 12 stone of Eels, 23 stone of Conger Eel, 21 stone of Megrims, 25 stone of Skate, 174 stone of Mackerel, 25 stone of Shrimps, 8 gallons of Cockles, $\frac{3}{4}$-barrel of Oysters, 196-lbs. of Crabs, 65 tins of Prawns, 430-lbs. of Lobsters, 2 stone of Salmon, 185-lbs. Escallops.

Total weight of Fish, 23,874-lbs.

FRUIT, VEGETABLES, ETC.

Sixteen dozen Cauliflowers, 1 sieve of Cherries, 32 boxes of Pears, 2 tins of Tomatoes, 22 dozen eggs, 1 tin of Liquid Eggs, 11-lbs. of Sausages, 162 tins of Milk, 158-lbs. of Bacon, 3 Turkeys, 101 Rabbits, 51 tins of Meat, 93 tins of Corned Beef, 40-lbs. of Chicken, 52 Pigeons, 266 tins of Fruit, 16 tins of Fish.

Total weight, 2,792-lbs.

FOOD AND DRUGS (ADULTERATION) ACT, 1928.

During the year five hundred and sixty-three samples were taken by the Sanitary Inspectors and submitted to the Public Analyst.

One hundred and sixty-one were formally purchased in accordance with the Act, and there were 402 test or informal samples, 158 of the latter being milk.

In 3 instances proceedings were taken, and the cases were dismissed, the magistrates accepting the plea that the milk was sold as yielded by the cow.

Article.	Number of Samples.	Genuine.	Adulterated.
Ammoniated Tincture of Quinine ...	3	3	—
Aspirins	3	3	—
Baking Powder	3	3	—
Beer	1	1	—
Bismuth Lozenges	3	3	—
Borax	6	6	—
Butter	29	29	—
Calcium Lactate Tablets	3	3	—
Camphorated Oil	3	3	—
Cheese	12	12	—
Cocoa	6	6	—
Coffee	6	6	—
Cream	4	4	—
Cream of Tartar	3	3	—
Custard Powder	6	6	—
Glucose	1	1	—
Gooseberries (Bottled)	1	1	—
Gregory Powder	4	3	1
Ham Sandwich	1	1	—
Honey	6	6	—
Hydrogen Peroxide	4	4	—
Jam	6	6	—
Lactose	2	2	—
Lard	17	17	—
Lard Substitute	2	2	—
Lemon Cheese	1	1	—
Liquorice Powder	3	3	—
Margarine	24	23	1
Milk	314	303	11
Milk Condensed	6	6	—
Milk Dried	4	4	—
Milk Skimmed	3	3	—
Mustard	1	1	—
Olive Oil	3	3	—
Pepper	6	6	—
Prawns	1	1	—
Salts	3	3	—
Sausages	15	15	—
Seidlitz Powder	3	3	—
Soda Bicarbonate	3	3	—
Sponge Cake	6	6	—
Suet	3	3	—
Tea	6	6	—
Tincture of Iodine	5	3	2
Tinned Fish	1	1	—
Tinned Fruit	3	3	—
Tinned Meat Paste	2	2	—
Tinned Tomatoes	1	1	—
Vinegar Malt	8	6	2
Zinc Ointment	3	3	—
Totals	563	546	17

The following Table shows the number of articles analysed which were found to be adulterated, and the result of proceedings taken :—

No.	Date, 1935.	Article.	Adulteration.	Result of Proceedings.
53	Feb. 15	Margarine	1.25% excess of moisture	Test sample. Subsequent samples taken and found genuine
98	Mar. 13	Milk ...	8.0% deficient in fat ...	Case dismissed
20	April 9	Milk ...	6.6% deficient in fat ...	Test sample
56	May 10	Milk ...	10.0% deficient in fat...	Proceedings taken against the farmer. See *
85	June 4	Milk ...	18.3% deficient in fat...	Test sample. See samples Nos. 187 and 188
87	,, 5	Milk ...	13.3% deficient in fat...	Case dismissed
88	,, 5	Milk ...	3.3% deficient in fat ...	Case dismissed
34	,, 18	Milk ...	3.3% deficient in fat ...	Test sample
40	,, 27	Milk ...	9.6% deficient in fat ...	See samples Nos. 255 and 257
55	,, 29	Milk ...	20.3% deficient in fat, and contained 2.2% added water	Appeal to the cow sample
57	,, 29	Milk ...	17.3% deficient in fat...	Appeal to the cow sample
92	Sept. 20	Malt Vinegar	Artificial Vinegar ...	Test sample
93	,, 20	Malt Vinegar	Contaminated ...	Test sample. Vendor cautioned
34	Oct. 4	Gregory Powder	25% deficient in Magnesium Carbonate	Test sample
75	,, 26	Milk ...	5% deficient in fat ...	Test sample
32	Nov. 15	Tincture of Iodine	84% excess Iodine ... 108% excess Potassium	Test sample
44	,, 25	Tincture of Iodine	28.8% excess Iodine ... 42.6% excess Potassium	Vendor cautioned

*Two further samples were taken in transit by the Hants County Council Inspector (Nos. 4493 and 4797), and on analysis showed 4.3% and 6.0% deficient in fat respectively.

MILK AND DAIRIES (CONSOLIDATION) ACT, 1915, and THE MILK AND DAIRIES (AMENDMENT) ACT, 1922.

There are now 195 purveyors of milk, including 10 cowkeepers, registered in the Borough.

The total includes 40 purveyors of milk who reside outside the Borough.

Particulars.	Town Proper.	Shirley, Freemantle, and Millbrook.	Portswood and Bitterne Park.	Bassett and Swaythling.	Woolston, Itchen and Bitterne.	Outside the Borough.	Total.
Number of Cowkeepers on Register	...	3	...	4	3	...	10
Number of Purveyors of Milk on Register	50	38	14	12	31	40	185
Number of Purveyors of Milk registered during the year ...	1	1	...	...	...	2	4
Number of Cowkeepers registered during the year	...	...	...	...	...	...	...

NUISANCES ABATED IN DAIRIES, COWSHEDS AND MILKSHOPS.

Milkshops cleansed and whitewashed	196
Dairies ,, ,, ...	74
Cowsheds ,, ,, ...	32
Dairies' paving repaired	3
Cowsheds re-paved	1
Cowsheds ventilated	1
Eaves, guttering, and stackpipes repaired ...	3
Drains cleared and repaired	4
Roofs repaired	2
Total ...	316

MILK AND DAIRIES ACTS (ELIMINATION OF TUBERCULOUS DAIRY COWS).

During the year 1935 there were nine persons keeping approximately 100 dairy cows within the Borough. The cows were clinically examined by the Veterinary Inspector twice during the year. Eleven were tuberculin tested; three reacted, and were slaughtered. One cow was slaughtered as the result of voluntary notification of suspected tuberculosis by the owner. Forty-four samples of milk were taken from the herds kept in the Borough, and tested for the presence of tuberculosis. Twenty-four proved to be negative; no results were obtained with 15 other samples, and the remaining 5 samples (which came from three cows) were found to contain tuberculosis. These three cows were slaughtered under the Tuberculosis Order, 1925.

Nine samples of milk coming from an outside source for sale within the Borough were tested for the presence of tuberculosis; one sample contained tuberculosis. The County Authority was informed, and the animal producing the infected milk was slaughtered.

This Department now keeps in close touch with the County Health Department, and, when animals killed in the slaughter-houses of Southampton are found to be affected with tuberculosis, the Meat Inspector at once notifies the County Medical Officer, giving all known particulars of the origin of the affected animal. During the year 1935, 38 of these notifications were sent, and upon four premises, cows suffering from tuberculosis were found, and subsequently destroyed.

A certified herd of dairy cows kept within the Borough has not been taken into consideration for the purpose of these figures.

MILK AND DAIRIES (CONSOLIDATION) ACT, 1915, and MILK AND DAIRIES ORDER, 1926.

During the year all premises where cows are kept, 9 in number, were visited twice. The following Table shows the number of samples taken, and the inspection of dairy herds for tuberculosis :—

Name.	Samples of Milk taken.	Result of Examination.			Inspection of Cows.		Tuber-culin Tested.	Slaughtered.	Remarks.
		Positive.	Negative.	No Result.	Half-Year.	Number.			
W. R. ...	1	—	1	—	1st	8	—	—	
	1	—	—	1	2nd	6	—	—	
J. ...	1	—	1	—	1st	2	—	—	
	—	—	—	—	2nd	2	—	—	
S. & W. ...	1	—	1	—	1st	9	1	1	This cow found free from Tuberculosis, but suffering from Mastitis. This cow was sent to market for slaughter.
	6	—	4	2	2nd	15	1	—	
G. H. B. ...	6	2	3	1	1st	46	5	3	The 5 Positive T.B. milk samples undoubtedly came from 3 cows only, as some of the samples were taken from bulk milk.
	15	3	5	7	2nd	41	2	2	
A. L. B. ...	1	—	1	—	1st	7	—	—	
	1	—	1	—	2nd	11	—	—	

Number of Samples taken, and the Inspection of Dairy Herds for Tuberculosis—Continued.

Name.	Samples of Milk taken.	Result of Examination.			Inspection of Cows.		Tuber-culin Tested.	Slaughtered.	Remarks.
		Positive.	Negative.	No Result.	Half-Year.	Number.			
M. S. ...	1	—	1	—	1st	5	—	—	
	1	—	—	1	2nd	7	—	—	
M. R. ...	1	—	1	—	1st	8	—	—	
	1	—	—	1	2nd	4	—	—	
E. C. ...	3	—	3	—	1st	7	—	—	
	1	—	—	1	2nd	7	1	1	This cow had given T.B. milk at end of 1934 and was slaughtered early in 1935.
H.	—	—	—	—	1st	—	—	—	
	3	—	2	1	2nd	8	1	—	
Totals	44	5	24	15	—	193	11	7	

MILK (SPECIAL DESIGNATIONS) ORDER, 1923.

During the year four applications were received from purveyors of milk for licences to use the designation "Certified Milk." Three to use the designation "Grade A" (Tuberculin Tested Milk), and twenty-three to use the designation "Pasteurized Milk."

HOUSES LET IN LODGINGS.

There are 14 houses in the Borough registered under the Bye-laws relating to Houses Let in Lodgings.

One hundred and fifty-two visits were made, and the houses generally kept in conformity with the Bye-laws.

COMMON LODGING HOUSES.

There are seven common lodging houses in the Borough with registered accommodation for 390 persons.

Two common lodging houses came within Clearance Areas and closed down, and one was closed voluntarily.

Applications for the registration of the 10 houses were made previous to the 31st December by the registered keepers, in accordance with the provisions of the Southampton Corporation Act, 1910.

Five hundred and fifty-four visits were made during the year, and the premises generally were kept in a satisfactory condition.

FACTORY AND WORKSHOP ACTS.

SUMMARY OF VISITS DURING YEAR 1935.

Factories	97
Workshops and Workplaces	1,406
Bakehouses (including Factory Bakehouses) ...	580
Laundries (including Factory Laundries) ...	145
Visits *re* Sanitary Matters...	1,272
Total	3,500

Reports received from H.M. Factory Inspector during the year, viz. :—

Nature of Report.	No. Sent in.	Action Taken.
New Workrooms and Change of Address	1	...
Workshops Notified (already on L.A. Register or re-notified after Notice from Local Authority)	1	...
Sanitary Defects	5	Defects remedied. One notice served.
Total	7	

Three notifications have been sent to H.M. Factory Inspector during the year, respecting new Workshops, change of address, or infringements of the Factory and Workshop Acts.

Five new Workrooms have been measured during the year.

BAKEHOUSES.

There are 110 Bakehouses on the Register, 73 being Factories and 37 Workshops. Eighty-four of these were in use at the end of the year, and 26 were unoccupied.

They give employment to 401 males and 36 females, in addition to those employed as shop assistants, roundsmen, etc.

Five hundred and eighty visits of inspection were made during the year, and eight nuisances abated.

All occupied Bakehouses were re-limewashed twice during the year in accordance with the Regulations.

One new Bakehouse was constructed during the year.

LAUNDRIES.

There are 32 Laundries on the Register, 26 of which use mechanical power and 6 manual labour.

One hundred and forty-five visits of inspection have been made during the year, and twelve nuisances abated.

In addition to the foregoing, 1,272 visits have been made during the year, comprising re-visits to Factories, Workshops, Workplaces, Bakehouses and Laundries, serving notices, investigating complaints of nuisances, overcrowding and various other matters.

HOMEWORK.

During February 34 lists were sent in containing the names and addresses of 77 Outworkers, and during August 32 lists containing the names and addresses of 75 Outworkers.

Of the 75 names received in August, 14 occupy premises registered as workshops, and of the remainder (61), 58 work on wearing apparel, and 3 on upholstery needlework.

The names and addresses of the Outworkers living outside the Borough have, in accordance with Section 107 of the Factory and Workshop Acts, been forwarded to the Authorities of the District in which they reside.

Seventy-three visits of inspection were made during the year, and one nuisance abated.

NUISANCES ABATED.

The number of nuisances abated during the year was 84, viz. :—Factories 8; Workshops and Workplaces 56; Bakehouses 8; and Laundries 12.

NUISANCES ABATED DURING THE YEAR.

	Factories.	Workshops.	Workplaces.	Bakehouses.	Laundries.	Totals.
Drains relaid, trapped and ventilated ...	1	2	...	...	2	5
,, cleared or repaired	1	...	1	...	2	4
,, inspection chambers constructed	...	...	...	...	1	1
,, soil pipes fixed	...	...	...	...	...	...
Sanit'ry conveniences provided to premises	2	1	...	...	...	3
,, ,, provided (separate for sexes)	...	...	...	...	...	...
,, ,, re-constructed ...	1	2	...	...	...	3
Water Closets — new pans fixed ...	...	...	...	...	...	...
,, ,, cisterns, flush pipes, etc., fixed	...	1	...	...	...	1
,, ,, intervening ventilated spaces provided ...	...	3	...	...	...	3
,, ,, seats, doors, floors, or roofs repaired ...	...	1	...	...	...	1
Defective roofs, walls, or floors of workshops repaired	...	5	2	1	1	9
Workshops cleansed and limewashed ...	...	12	7	2	...	21
Yards paved or repaired	...	1	...	...	...	1
Eaves, guttering and stack-pipes repaired	...	3	...	1	1	5
New sinks and waste pipes fixed... ...	...	3	...	2	...	5
Smoke nuisances abated	1	4	...	...	4	9
Accumulations of manure or refuse removed	2	6	2	2	1	13
Totals ...	8	44	12	8	12	84

CASES OF INFECTIOUS DISEASE OCCURRING IN HOMES OF EMPLOYEES OF FACTORIES AND WORKSHOPS.

Five cases of Scarlet Fever and five cases of Diphtheria have occurred in the homes of employees of Factories and Workshops.

Five of these cases were removed to the Isolation Hospital and five were isolated at home.

The workers living in the houses where Scarlet Fever occurred received a disinfecting bath, and had their clothes disinfected before resuming duties.

The premises in which cases occurred were disinfected, and bedding removed for disinfection after the removal of patients to Hospital.

THE RAG FLOCK ACTS, 1911 and 1928.

There are no premises in the district in which rag flock is manufactured. Bedding manufacturers and upholsterers obtain their supplies from factories outside the Borough. Inspections are made and samples taken of these supplies by the Workshops Inspector.

Five samples were taken during the year and submitted to the Public Analyst, the result being as follows :—

No. of Sample.	Result of Analysis.
1	Chlorine as Chlorides, 6.25 parts per 100,000
2	" " 7.5 " "
3	" " 5.0 " "
4	" " 10.0 " "
5	" " 21.5 " "

NOTE.—The limit of Chlorine permitted by the Act is 30 parts per 100,000.

SHOPS ACTS, 1912 to 1934.

During the year 3,985 visits of inspection have been made under the Acts, and the following prosecutions were taken for contraventions:—

Date.	Initials of Defendant.	Nature of Offence.	Result.
Jan. 14	W. E. B.	Selling non-exempted articles after closing hour	Fined 20/-
,, 21	Misses S. and N.	Infringement of B. and H. (Sunday Closing) Act, 1930	Costs 4/-
Mar. 8	A. G.	Selling non-exempted articles after closing hour	Fined 20/-
,, 8	V. C.	Ditto ditto ditto	Fined 20/-
,, 8	A. G. H.	Ditto ditto ditto	Fined 20/-
,, 8	S. M.	Ditto ditto ditto	Fined 20/-
,, 8	C. S.	Ditto ditto ditto	Fined 20/-
Apr. 29	A. J. E.	Ditto ditto ditto	Fined 5/-
,, 29	G. G.	Ditto ditto ditto	Fined 40/-
,, 29	R. N.	Ditto ditto ditto	Fined 5/-
May 23	R. A. F.	Ditto ditto ditto	Fined 20/-
Oct. 1	J. F.	Ditto ditto ditto	Fined 10/-
,, 1	A. G.	Ditto ditto ditto	Fined 5/-
,, 1	G. L.	Ditto ditto ditto	Dismissed
,, 1	C. N.	Ditto ditto ditto	Fined 10/-
,, 1	R.W.	Ditto ditto ditto	Fined 10/-
Nov. 11	A. G. H.	Ditto ditto ditto	Fined 20/

In addition, 123 verbal warnings were given to various shopkeepers for offences during the year.

The two following Tables are inserted by request of the Secretary of State.

FACTORIES, WORKSHOPS AND WORKPLACES.

1.—INSPECTION OF FACTORIES, WORKSHOPS AND WORKPLACES.

Including Inspections made by Sanitary Inspectors.

Premises. (1)	Number of Inspections. (2)	Written Notices. (3)	Occupiers prosecuted. (4)
Factories ... ... (including Factory Laundries)	200	1	...
Workshops ... ... (including Workshop Laundries)	1,448	4	...
Workplaces ... ... (Other than Outworkers' premises)	248	1	...
Totals	1,896	6	...

2.—DEFECTS FOUND IN FACTORIES, WORKSHOPS AND WORKPLACES.

Particulars. (1)	Number of Defects. Found. (2)	Remedied. (3)	Referred to H.M. Inspector. (4)	Number of Offences in respect to which Prosecutions were instituted. (5)
NUISANCES UNDER THE PUBLIC HEALTH ACTS :—*				
Want of Cleanliness	21	21	...	...
Want of Ventilation	3	3	...	...
Overcrowding	...	...	...	...
Want of drainage of floors... ...	3	3	...	...
Other nuisances	49	49	...	...
Sanitary accommodation — insufficient ...	3	3	...	...
Sanitary accommodation — unsuitable or defective ...	5	5	...	...
Sanitary accommodation — not separate for sexes ...	...	...	...	...
OFFENCES UNDER THE FACTORY AND WORKSHOP ACTS :—				
Illegal occupation of underground bakehouse (s. 101)	...	...	...	...
Other Offences ... ... (Excluding offences relating to outwork and offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921).	...	...	...	...
Totals	84	84	...	...

* Including those specified in Sections 2, 3, 7 and 8 of the Factory and Workshop Act, 1901, as remediable under the Public Health Acts.

3.—OUTWORK IN UNWHOLESOME PREMISES, Section 108.

NIL.

Southampton
Port Sanitary Authority.

Southampton Port Sanitary Authority.

ANNUAL REPORT

FOR THE

Year ended 31st December, 1935.

PORT OF SOUTHAMPTON.

The Port and Harbour of Southampton are controlled by the Southampton Harbour Board as constituted by the Southampton Harbour Act, 1913.

The Port Sanitary Authority, which was permanently constituted by an Order of the Local Government Board, dated June 8th, 1893, is " the Mayor, Aldermen, and Burgesses of the Borough of Southampton acting by the Council." It exercises Port functions in waters abutting upon the County Borough of Southampton, the Urban Sanitary District of Fareham, and the Rural Districts of New Forest, Romsey and Stockbridge, and Winchester, until 30th September, 1935, when the new Port Sanitary Authority Order came into force.

As was mentioned in the Annual Report for 1934, the question of enlarging the " Limits of Jurisdiction " was discussed with the officials of the Ministry of Health and other interested bodies. As a result of these discussions, the Port Sanitary Authority's area of control was enlarged by the agreement, and the new area is now defined in the Southampton Port Sanitary Authority Order, 1935.

The Order is quoted in full below :—

SOUTHAMPTON PORT SANITARY ORDER, 1935.

1. The Order may be quoted as the Southampton Port Sanitary Order, 1935, and shall come into operation on the first day of October, 1935.

SOUTHAMPTON PORT SANITARY AUTHORITY

AREA

Up to September 30th, 1935,
coloured BLUE.

From October 1st, 1935,
coloured RED and BLUE.

R. Test
REDBRIDGE
MILLBROOK
TOTTON
R. Itchen
DOCKS
SOUTHAMPTON DOCKS
BURSLEDON
R. Hamble
HYTHE
SOUTHAMPTON WATER
HAMBLE
FAWLEY
Calshot Castle
Hill Head
Lee Pt
Beaulieu R.
Stone Pt
West Bramble
E Bramble
Prince Consort Buoy
COWES ROADS
Egypt Pt
East Lepe
Gurnard Ledges
THE SOLENT
WEST COWES
EAST COWES
Medina R.
Old Castle Pt
SPITHEAD
STOKES BAY
Ryde Pier

COWES PORT SANITARY AUTHORITY

SCALE OF STATUTE MILES

FURLONGS 8 6 4 2 0 1 2 3 4 5 MILES

2. In this Order, unless the context otherwise requires, "the district" means those parts of the Customs Ports of Cowes, Portsmouth, and Southampton placed under the jurisdiction of the Port Sanitary Authority constituted by this Order; "ship" includes vessel or boat; and "the Order of 1893" means the "Order of the Local Government Board, dated the 8th day of June, 1893."

3. The Interpretation Act, 1889, applies to the interpretation of this Order as it applies to the interpretation of an Act of Parliament.

4. The Order of 1893 is hereby rescinded, and the Southampton Port Sanitary Authority constituted thereby shall cease to exist.

5. The Mayor, Aldermen and Burgesses of the Borough of Southampton acting by the Council shall be permanently constituted the Port Sanitary Authority for the district.

6. The jurisdiction of the Port Sanitary Authority shall extend to so much of the Customs Port of Cowes, Portsmouth, and Southampton as is comprised within the boundaries formed by the following lines, that is to say: A straight line from Stone Point to East Lepe Buoy, thence in a straight line to Gurnard Ledge Buoy, thence in a straight line to a point one cable north of Egypt Point, thence in a straight line to Prince Consort Shoal Buoy, thence in a straight line to Old Castle Point Buoy, thence in a straight line to the most northerly point of Ryde Pier, thence in a straight line to the junction of the western and southern boundary of the Portsmouth Port Sanitary Authority, thence in a straight line to the most southerly point of the pier of the Southern Railway at Stokes Bay, thence in a straight line to the Lee Point Sewer Buoy, thence in a straight line to Hill Head; together with the waters of those parts of the said Customs Ports within such limits, and all docks, basins, harbours, quays, wharves, creeks, rivers, channels, roads, bays, and streams within those parts of the said Customs Ports, and the places which may from time to time be appointed as the Customs boarding station or stations for those parts of the said Customs Ports, and the places for the time being appointed for the mooring or anchoring of ships for those parts of the said Customs Ports under any regulations for the prevention of the spread of diseases

issued under the Authority of the statutes in that behalf and for the purposes of any such regulations as aforesaid shall also extend to any ship which in pursuance thereof or of any directions given thereunder shall be moored or anchored at the place appointed thereunder as aforesaid, or which shall be on its way thither.

7. (1) For the purposes of this Order the enactments mentioned in the schedule to this Order shall apply, and the Port Sanitary Authority shall exercise and be subject to all the powers, rights, duties, capacities, liabilities, and obligations of an Urban Authority under those enactments so far as they are applicable to :—

(a) The waters within the district or ships coming or being within the district.

(b) Persons upon any such ship or brought by any such ship within the district ; or

(c) Goods or things upon or landed from any such ship, and being within the district which in the opinion of the Port Sanitary Authority or their Medical Officer of Health require to be disinfected or destroyed.

(2) Where any enactment applied by this Order has by any Act been amended in its application to Urban Authorities, that enactment shall have effect as so amended in its application to the Port Sanitary Authority.

(3) Nothing herein contained shall affect the powers of any riparian authority, except as to such waters, ships, persons, and things as above-mentioned.

8. The Port Sanitary Authority may from time to time appoint a committee or committees consisting of members of such Authority for the exercise of any powers which in the opinion of such Authority can be properly exercised by a committee, but the acts of every such committee shall, unless otherwise directed by the Port Sanitary Authority, be submitted to them for approval. Provided that a committee so appointed shall in no case be authorised to borrow money to issue any precept for contributions, or to enter into any contract, and shall be subject to the provisions of Section 96 of the Local Government Act, 1933, so far as they are applicable.

9. Any expenses incurred by the Port Sanitary Authority by virtue of the powers conferred on them by this Order shall be defrayed by the Mayor, Aldermen and Burgesses of the Borough of Southampton as part of their general expenses under the Public Health Acts, and the accounts of the Port Sanitary Authority shall be subject to audit by a district auditor.

The new limits of jurisdiction of the Port, although not increasing the actual work, has legalised the position, as the Port Medical Officer and his staff can now deal with any defects in ships and cases of infection with greater confidence, knowing that the new area embraces those parts of which there was some doubt in the past.

During the year up to the 1st October, when this Order became operative, 182 vessels landed passengers for this Port outside of our limits of jurisdiction.

PART I.

Sections I to VII, Tables A to J, are prepared in the form and sequence requested by the Ministry of Health in Memo. 174/S.A.

Part II gives in further detail the work connected with Port Sanitary Administration.

Section I.—AMOUNT OF SHIPPING ENTERING THE PORT DURING THE YEAR 1935.

TABLE A.

The following table shows the number and tonnage of vessels entering the Port during the year, and the number inspected.

—	Number.	Net Tonnage.	Number Inspected.		Number reported to be Defective.	Number of Vessels on which defects were remedied.	Number of Vessels reported as having, or having had, during the voyage infectious disease on board.
			By the Medical Officer of Health.	By the Sanitary Inspector.			
From Foreign—							
Steamers...	2,574	10,191,027	640	1,380	49	43	133
Motor ...			109	319	1	1	29
Sailing ...			...	1	...	...	...
Fishing ...			...	...	...	...	...
Total Foreign...	2,574	10,191,027	749	1,700	50	44	162
From Coastwise—							
Steamers...	13,095	1,849,488	2	770	50	35	4
Motor ...			...	259	7	6	1
Sailing ...			...	56	1	1	...
Fishing ...			...	...	...	...	...
Total Coastwise	13,095	1,849,488	2	1,085	58	42	5
Total Foreign & Coastwise	15,669	12,040,515	751	2,785	108	86	167

NOTE.—Of the 751 vessels visited by the Medical Officer of Health, 53 were boarded by the Medical Officer of Health alone, and 698 were boarded by both Medical Officer of Health and Sanitary Inspectors.

Section II.—CHARACTER OF TRADE OF PORT.

TABLE B.

(A) Passenger Traffic during 1935.

Number of Passengers.	Places out of Europe.				Continent of Europe.	Channel Islands.	Trans-migrants.
	1st Class.	2nd Class.	Tourist Class.	3rd Class.			
Inwards	26,537	8,086	29,226	12,084	68,379	86,548	2,147
Outwards	29,861	17,531	34,557	16,569	61,032	84,115	3,989

Note.—The figures given in the above table are exclusive of the number of persons travelling on pleasure cruises between the United Kingdom and places out of Europe, as particulars of this class of travel of these passengers are not required to be furnished.

(B) Cargo Traffic.

Principal Imports: Meat, butter, cheese, cocoa, coffee, grain, sugar, fruit and vegetables, hides, skin, and wool.

Principal Exports: Manufactured articles, machinery, etc.

(C) Foreign Ports from which Vessels Arrive.

Ports in Europe, North and South America, Asia, Africa, Australia, and various other Ports throughout the world.

Section III.—SOURCE OF WATER SUPPLY.

(A) For the Port. (B) For Shipping.

The water supply to the Port and for vessels is the same as supplied to the Town of Southampton. This water is derived from deep wells sunk into the chalk at Otterbourne, Twyford, and Timsbury.

Samples of water are taken from time to time to ensure that the supply is chemically and bacteriologically pure.

The Southampton Corporation supplies water to the whole of the Docks, and mains are available at every berth for supplying the vessels.

There are hydrants for the supply of water at the Town Quay, Shell-Mex and Agwi Jetties, and at the wharves at Eling, Redbridge, and on the River Itchen.

For vessels which do not berth, there are eight water boats equipped for supplying fresh water.

(c) Number of Water Boats and their Sanitary Condition.

There are three water boats exclusively used as such, namely: Ariel, 20 tons; Aquator, 200 tons; and Test, 80 tons.

In addition, the following are equipped for this purpose, and are used if required as water carriers:—Beaulieu, 18 tons; Bonaparte, 20 tons; Flying Kestrel, 154 tons; Haulier, 60 tons; and Romsey, 100 tons, are primarily used as tugs.

All these boats have been kept under strict supervision during the year, and in one instance cleansing of the tanks has been carried out as the result of an unsatisfactory report of a sample submitted for analysis.

Section IV.—PORT SANITARY REGULATIONS, 1933.

1. Arrangements for dealing with "Declaration of Health."

The following routine has continued to work satisfactorily throughout the year:—

(a) That where a vessel is first boarded by an officer of the Port Sanitary Authority, that officer shall retain the "Declaration of Health," and leave an "All Clear" Certificate on board for the Customs Officer.

(b) That where an officer of Customs and an officer of the Port Sanitary Authority board a vessel together, the latter officer shall take the "Declaration of Health," and hand the "All Clear" Certificate to the Customs Officer.

(c) That where a vessel is first boarded by a Customs Officer, that officer shall take the "Declaration of Health," and forward it to the Port Sanitary Authority as soon as possible, and the officer of the Port Sanitary Authority receiving the "Declaration of Health" shall sign a receipt, if required.

Where a vessel has been boarded by an officer of H.M. Customs prior to the visit by an officer of the Port Sanitary Authority, a form is left with the Master indicating the condition reported on the "Declaration of Health," and stating whether the vessel has been:—

(a) Granted full pratique.

(b) Granted modified pratique.

(c) Or detained for inspection by the Port Medical Officer.

Vessels which trade exclusively within the "Home Trade" limits are not required to present a "Declaration of Health" form under the Port Sanitary Regulations, 1933, but the Authority request them to complete a Blue Medical Certificate, giving essential particulars regarding infectious disease (actual or suspected) on arrival.

2. Boarding of Vessels.

All vessels which berth within the Docks, and all vessels anchoring elsewhere and landing passengers by tender at this Port, are boarded on arrival by an officer of the Port Sanitary Authority and H.M. Customs.

Other vessels which berth outside the Docks are boarded by H.M. Customs, and, if requiring attention, are dealt with later by the Port Sanitary Authority.

All vessels which arrive from any foreign port or seaboard which is included in the list prepared pursuant to the provisions of Article 11, and any vessels which have had a case of infectious disease during the voyage are visited by one of the Port Medical Officers.

Regular rounds are made by the staff in the Port Sanitary launch to deal with vessels which anchor in Southampton Water, or in the Rivers Itchen and Test.

The flying of distinguishing flags on the Port Medical Officer's launch has been continued, and has facilitated the work of boarding vessels lying outside the Docks.

3. Notification to the Authority of Inward Vessels requiring Special Attention (Wireless Messages, Land Signal Stations, Information from Pilots, Customs Officers, etc.).

The Minister of Health, by notice published in the "London Gazette," 31st October, 1933, declared that the provisions of Article 6 of the Port Sanitary Regulations, 1933, shall apply to the Southampton Port Sanitary district as from 1st February, 1934.

The section in question reads as follows :—

"6. (1) Where the Minister has by notice published in the 'London Gazette' declared that the provisions of this Article shall apply to any district specified in the notice, the Master of any foreign-going ship fitted with a suitable wireless transmitting apparatus, on approaching such a district from a foreign port,

shall, if any person on board has symptoms which may be indicative of infectious disease other than tuberculosis, or if there are any circumstances requiring the attention of the Medical Officer, send to the Sanitary Authority a wireless message embodying such of the information set out in the Second Schedule to these Regulations as are applicable.

" (2) Any wireless message so required to be sent so as to reach the Sanitary Authority not more than twelve, and not less than four hours, before the time at which the ship is expected to arrive in the district.

" (3) Any wireless in wireless code delivered to the Sanitary Authority shall, unless otherwise provided in the notice published pursuant to paragraph (1) of this article, conform with the section relating to the 1931 International Code of Signals."

Arrangements have been made for the reception (and de-coding, if necessary) of wireless messages sent direct to the Port Sanitary Office at the Docks, and the telegraphic address of " Portelth Southampton " has been registered by the Post-Office.

Wireless messages are also received through agents approved by the Port Sanitary Authority. Before this approval is given, however, agents are required to furnish evidence that they possess facilities for receiving such messages at all times of the day or night, and can undertake prompt transmission to the Port Sanitary Office of any messages received by them relating to the state of health on board.

The following agents, having satisfied these requirements, and have been approved as agents for the purpose of Article 6 of the Regulations :—B. Ackerley & Co. ; Canadian Pacific Company ; Coast Lines, Ltd. ; Cunard White Star, Ltd. ; McGregor, Gow & Holland ; T. Meadows & Co. ; R. & J. H. Rea, Ltd. ; Smith Sundius & Co. ; Wainwright Bros. & Co. ; Anglo-American Oil Co. ; and Escombe McGrath & Co.

The following Companies elected to send their messages direct to the Port Sanitary Authority in all cases :—

Southern Railway Company ; Dawson Bros., Ltd. ; Elders & Fyffes, Ltd. ; General Steam Navigation Company ; Haddon & Beavis, Ltd. ; Royal Mail Lines, Ltd. ; Union-Castle Company ; Sandell Bros. ; J. Horn & Son ; Stephenson & Clarke, Ltd. ; and Stewart & Esplen, Ltd.

From 1st February to 31st December, 1935, the following wireless messages were received from incoming vessels :—

(a) Direct, 1382 (61 being in code).

(b) Through agents, 596.

H.M. Customs advise the Port Sanitary Authority of any cases of sickness which come to their notice on outlying vessels.

4. Mooring Stations Designated under Article 10 : (a) Within the Docks, (b) Outside the Docks.

The following "Mooring Stations" have been established with the concurrence of the Customs and Harbour Authorities, and the consent (where necessary) of the Minister of Health :—

Inner Mooring Stations.

(a) For vessels bound for the Southern Railway Docks, for Agwi Jetty, or for Shell-Mex Jetty.—The usual place of mooring, subject to the vessel being moored at least six feet from the quay or jetty.

(b) For vessels bound for places in the Southampton Port Sanitary Area other than those specified at (a)—Between Hythe Pier and the Pilot Cutter Moorings in Southampton Water.

Outer Mooring Stations.

(a) For vessels not exceeding 500 feet in length.—Between Hamble Spit Buoy and Shell-Mex Jetty in Southampton Water.

(b) For vessels exceeding 500 feet in length.—At Stokes Bay.

5. Particulars of any Standing Exemption from the Provisions of Article 14.

In view of the comprehensive arrangements in force at this Port to secure that incoming vessels are met on arrival by an officer of the Port Sanitary Authority, the only standing exemption to Article 14 applies to vessels which berth outside the Southern Railway Docks, and reads as follows :—"That healthy vessels from an infected port should be allowed to proceed to their own berth and to unload, but that the Medical Officer of Health should be informed as soon as possible. That, in the event of the ship being unhealthy, the Customs Officer will notify the Port Sanitary Authority at the earliest possible moment and detain the ship."

The above arrangement has been found to work satisfactorily, and no further standing exemptions are contemplated.

6. Experience of Working Article 16.

The provisions of Article 16 have given rise to no difficulty, and have been willingly observed by all concerned.

Permits are issued by the Port Medical Officer on the application of Shipping Companies for employees to board incoming vessels for the purpose of conveying and distributing mails, etc., prior to the vessel being released from control under the Port Sanitary Regulations, 1933.

These permits would be withheld in the event of serious infectious disease being present.

Our practice of requiring addresses of passengers landing at Southampton from all vessels, except those which have called exclusively at North Atlantic ports during the voyage, has been continued throughout the year.

The declaration of address and notification of change of address system, advocated by the Association of Port Sanitary Authorities, has been adopted for contacts disembarking at this Port.

7. (a) Premises and Waiting Rooms for Medical Examination.

Premises and waiting rooms for medical examinations are provided in connection with the rooms used by the Immigration Officers ; on the larger vessels using this Port, adequate facilities for medical examination are usually available on board.

(b) Cleansing and Disinfection of Ships, Persons and Clothing, and other Articles.

Disinfection of quarters is carried out in all cases of infectious disease by the staff of the Port Sanitary Authority, or by the Shipping Companies under their supervision.

Formalin spray is the method employed together with thorough cleansing. Should fumigation be required, this is carried out by firms of chemists who specialise in this work, under the supervision of the Port Sanitary Authority. Contacts requiring disinfection are taken to the Disinfecting Station at West Quay, where fully-equipped bathrooms are available. Clothing and other articles are also dealt with at this station by means of steam disinfectors.

(c) Premises for the Temporary Accommodation of Persons for whom such Accommodation is required for the Purpose of the Regulations.

No special accommodation has been set aside for this purpose, but this could be speedily arranged, should the occasion arise, at the Borough Hospital (450 beds), or at one of the hospitals for infectious disease.

(d) Hospital Accommodation available for Plague, Cholera, Yellow Fever, Small Pox, and other Infectious Diseases.

The following Hospitals provided by the Southampton Corporation are available for cases or suspected cases of infectious disease arriving at this Port :—

(1) Isolation Hospital, Millbrook—171 beds are available for these cases.

(2) Small Pox Hospital, Millbrook Marsh, providing accommodation for 30 cases.

(e) Ambulance Transport.

The three motor ambulances provided by the Corporation are available for the Port for the removal of cases of infectious disease. Ambulances provided by the Fire Brigade and the Red Cross Society are also available for non-infectious cases. The motor launch provided by the Port Sanitary Authority is adapted for the transport of two stretcher cases.

(f) Supervision of Contacts.

The procedure for ascertaining passengers' destination has been described in dealing with the working of Article 16, and the Medical Officer of Health of the district to which such passengers are proceeding is informed by letter, giving necessary particulars. Contacts remaining in the Borough are kept under observation by the Sanitary Inspectors.

The same procedure applies to seamen who are paid off in this Port.

8. Arrangements for Bacteriological Examination of Rats for Plague.

All rats caught or found dead about docks or on vessels are brought to the Port Sanitary Office, where they are examined, and a proportion submitted to post-mortem examination by the Medical Officers, specimens being forwarded to the Municipal Laboratory for microscopical and cultural examination.

9. Arrangements for other Bacteriological or Pathological Examination.

This work is carried out by the Pathologist at the Municipal Laboratory.

10. Arrangements for the Diagnosis and Treatment of Venereal Disease among Sailors under International Arrangements.

The treatment centre at the corner of New Road and Cardigan Road, is a separate building, devoted entirely to treatment of venereal diseases, and provides all facilities for treatment for sailors under the International Convention.

The centre is under the charge of a full-time Venereal Diseases Medical Officer and Pathologist, and facilities are provided for daily treatment. The clinic enjoys the co-operation of Ships' Surgeons and Shipping Companies, who accept certificates of fitness to resume duty issued by the Venereal Diseases Medical Officer.

Cases of venereal disease on board vessels in the Port, coming to the notice of the Port Medical Officers, are referred to the clinic for treatment, and leaflets, giving particulars of the facilities available, are left by the Sanitary Inspectors on board vessels visited by them.

Notices giving particulars about these diseases are renewed regularly, and are fixed in all the public lavatories about the Docks.

11. Arrangements for the Interment of the Dead.

The Port shares the facilities of the town for this purpose, the Corporation providing Cemeteries and a modern Crematorium.

A new Municipal Mortuary has been erected during the year at West Quay Esplanade, adjoining the Disinfecting Station. Full details of this new building are given on page 32 of the Report on the Health of the County Borough.

12. Other Matters, if any, requiring or receiving Attention.

As required by Article 2, a complete list of infected ports and seaboards is compiled each month by the Port Medical Officer of Health, and six copies forwarded to the Chief Preventive Officer additions or amendments being notified weekly.

Copies of these lists are also forwarded to the Pilots Association for the information of Inward Pilots.

PSITTACOSIS.

The Parrots (Prohibition of Import) Regulations, 1930.

The importation of any bird of the parrot species is prohibited by these Regulations, unless for consignment to the London Zoological Society, or by special permission of the Minister of Health, and enquiries are made on all incoming vessels as to the presence of any bird on board.

Notifications are received by the Port Sanitary Authority of any cases coming to the notice of H.M. Customs.

During the year no cases of attempted smuggling of birds into the Port was detected.

The following table shows the action taken during the year under these Regulations :—

Twenty-five notices were served in respect of 54 parrots, Of this number 15 were re-exported, 16 were surrendered and destroyed under the supervision of the Port Sanitary Staff, one bird died after arrival, 11 were imported under license of the Minister of Health, and nine were returned British bred birds which were refused entry into Jersey and America. There are eight parrots detained on yachts laid up in this Port : these are periodically inspected by the Port Sanitary Staff.

The parrot that died was landed from the S.S. " Asturias," 9th July, 1935, and died whilst under detention at the Port Sanitary Office. The carcase was forwarded to the Ministry of Health's laboratories for examination. The report received was to the effect that the parrot did not show any microscopic signs of Psittacosis.

TABLE C.

Cases of Infectious Disease landed from vessels.

Disease.	Number of cases during 1935.		Number of Vessels concerned.	Average number of cases for previous five years.
	Passengers.	Crew.		
Chicken Pox	13	3	8	9.6
Diphtheria	5	1	6	7.4
Dysentery	18	...	11	18.2
Enteric Fever and Para-Typhoid Fever	7	7	11	14.2
Encephalitis Lethargica ...	1	...	1	1.6
Erysipelas	1	1	2	1.8
German Measles	2	...	2	2.0
Influenza	2	2	2	12.6
Measles	25	1	13	17.8
Mumps	4	1	5	7.0
Pneumonia	14	4	13	31.8
Poliomyelitis...	3	...	3	1.4
Scarlet Fever	12	1	7	5.4
Septicaemia Streptococcal ...	...	...	...	...
Small Pox	...	...	...	.2
Tonsillitis	7	6	7	14.2
Tuberculosis	97	6	35	119.4
Venereal	37	20	33	69.4
Whooping Cough	7	...	4	7.8
Totals	255	53	163	—

TABLE D.

Cases of Infectious Sickness occurring on vessels during the voyage, but disposed of prior to arrival.

Disease.	Number of cases during 1935.		Number of Vessels concerned.	Average number of cases for previous five years.
	Passengers.	Crew.		
Chicken Pox	4	...	3	3.2
Diphtheria	3	...	3	.8
Dysentery	1	...	1	.8
Enteric Fever and Para-Typhoid Fever	3	2	5	2.0
Encephalitis Lethargica ...	...	1	1	...
Erysipelas	...	...	...	.2
German Measles	2	...	2	1.4
Influenza	...	...	...	1.4
Measles	5	...	3	7.0
Mumps	1	...	1	1.2
Pneumonia	5	4	9	10.6
Poliomyelitis...	...	...	...	...
Scarlet Fever	4	...	3	1.0
Septicaemia Streptococcal ...	...	1	1	...
Small Pox	...	1	1	.8
Tonsillitis	1	1	2	.2
Tuberculosis	3	1	4	20.5
Venereal	...	1	1	.6
Whooping Cough	1	...	1	1.6
Totals	33	12	41	—

Section V.—MEASURES AGAINST RODENTS.

1. Steps taken for Detection of Rodent Plague: (a) In Ships in the Port. (b) On Quays, Wharves, Warehouses, etc., in the vicinity of the Port.

All vessels entering the Port are inspected for indications of rat infestation, and all rats caught on ships or about the Docks are examined by the Staff at the Port Sanitary Office, a proportion being selected for post-mortem and bacteriological examination.

During the past year bacteriological specimens were taken from the spleen and liver of 101 rats, all of which were found to be free from plague infection.

2. Measures taken to Prevent the Passage of Rats between Ships and the Shore.

The following regulations are enforced in the case of all vessels from infected ports, grain carrying ships, or vessels showing evidence of rat infestation, and have been voluntarily adopted by practically all the shipping companies in the case of other vessels :—

(1) That the ship be so moored that at no point is she less than six feet from the quay or wharf.

(2) That all ropes, warps, etc., used for mooring the ships be fitted with canvas rat-guards, two feet long, the same to be daily coated with tar, or fitted with shields or discs ; all such rat-guards when fitted to be clear of ship and quay, and readjusted with rise and fall of the tide.

(3) That no gangway, shoot, plank, etc., connecting the ship with the shore, except that which is in actual use, be permitted ; and that any gangway, shoot, plank, etc., while connecting the ship with the shore, and not in constant use, shall have a man in attendance day and night. The gangway shall be provided with a light from sunset to sunrise.

(4) Booms and other appliances provided for the purpose of keeping the ship in position, and connecting the ship with the quay, shall be kept coated with tar parcelling at least three feet in length, and the tar renewed daily.

3. Methods of Deratisation of: (a) Ships. (b) Premises in the vicinity of Docks or Quays.

(a) On Ships.

(1) Trapping and poisoning.—Regular trapping on board ship is carried out by the Shipping Companies, the majority of whom employ professional rat-catchers. Poison baits have been used in several instances during the year as an accessory method.

(2) Fumigation.—There have been no vessels entering the Port during the year which have necessitated fumigation owing to rat prevalence.

It is the practice, however, for several Companies to carry out fumigation annually for the purpose of freeing the ships from cockroaches or other vermin. Fifteen such fumigations were carried out by firms of contracting chemists by the following fumigants of the Hydro-Cyanic Acid group:—Liquid Hydro-Cyanic Acid (7), Sodium Zyklon B (4), Hydro-Cyanic Acid Liquid and Discs (3) and Sulphur (1).

Deratisation Certificates were asked for by the Companies in each case, and the work was therefore supervised and approved throughout by the Port Sanitary Authority.

(b) Premises in the Vicinity of Docks and Quays.

The Southern Railway Company employ a full-time rat-catcher about the Docks, warehouses, etc., the methods employed being trapping and poisoning.

4. Measures taken for the Detection of Rat Prevalence in Ships and on Shore.

Systematic inspection is carried out for rat traces and harbourage on all vessels, quays, wharves, and warehouses. The systematic measures which are carried out for the destruction of rats, referred to in the previous section, resulted in only 1,017 rats being caught (205 on vessels and 812 on shore).

5. Rat-Proofing.

(a) To what extent are docks, wharves, warehouses, etc., rat-proof?

(b) Action taken to extend rat-proofing.

(a) and (b). The standard of rat-proofing of the sheds, wharves, and warehouses is, generally speaking, satisfactory. Practically all sheds are of metal construction, the floors being of concrete, surfaced with tar-paving; a few remaining sheds which are of wooden construction have been floored with concrete.

During the year the new Docks Extension has been regularly utilised for passenger and cargo traffic. All buildings on this extension have been constructed on the most modern principles to prevent rat harbourage.

The Solent Flour Mills have been built adjoining the quay, and grain is discharged from vessels directly to these mills by means of suction elevators.

(i) In Ships.

Schedules of work to correct or protect rat harbourage were served and complied with in the case of 66 vessels requiring Deratisation Exemption Certificates.

RATS DESTROYED DURING 1935. TABLE E.

(1) ON VESSELS.

Number of Rats.	Jan.	Feb.	Mar.	April.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.	Total in Year.
Black	6	15	9	12	20	18	1	33	38	30	11	4	202
Brown	1	...	...	...	...	...	2	...	...	...	...	...	3
Species not recorded ...	...	...	...	...	...	...	...	...	...	...	...	...	...
Examined	7	15	9	12	20	18	3	38	38	30	11	4	*205
Infected with Plague	...	...	...	...	...	...	...	...	...	...	...	...	...

TABLE F.

(2) IN DOCKS, QUAYS, WHARVES AND WAREHOUSES.

Number of Rats.	Jan.	Feb.	Mar.	April.	May.	June.	July.	Aug.	Sept.	Oct.	Nov.	Dec.	Total in Year.
Black	...	...	...	...	...	...	...	...	...	...	...	...	...
Brown	68	58	107	58	72	80	53	63	69	60	65	59	812
Species not recorded	...	...	...	...	...	...	...	...	...	...	...	...	...
Examined	68	58	107	58	72	80	53	63	69	60	65	59	*812
Infected with Plague	...	...	...	...	...	...	...	...	...	...	...	...	...

* The totals in E and F of Rats examined include 101 Bacteriologically examined.

TABLE G.

Measures of Rat Destruction on Plague "Infected" or "Suspected" vessels from Plague-infected ports arriving in the Port during the year 1935.

Total number of such Vessels arriving.	Number of such Vessels fumigated by $S.O._2$.	Number of Rats killed.	Number of such Vessels fumigated by H.C.N.	Number of Rats killed.	Number of such Vessels on which trapping, poisoning, etc., were carried out.	Number of Rats killed.	Number of such Vessels on which measures of Rat destruction were not carried out.
1.	2.	3.	4.	5.	6.	7.	8.
145	—	—	4	—	32	48	111

TABLE H.

Deratisation Certificates and Deratisation Exemption Certificates issued during the year.

Net Tonnage.	Number of Ships.	Number of Deratisation Certificates issued.					Number of Deratisation Exemption Certificates issued.	Total Certificates issued.
		After fumigation with.			After trapping, poisoning, etc.	Total.		
		H.C.N.	$S.O._2$.	H.C.N. and $S.O._2$.				
Ships up to 300 tons...	22	—	—	—	—	—	22	22
,, from 301 to 1,000 tons ...	35	—	—	—	—	—	35	35
,, from 1,001 to 3,000 tons ...	10	1	1	—	—	2	8	10
,, from 3,001 to 10,000 tons ...	55	5	—	—	—	5	50	55
,, over 10,000 tons	30	8	—	—	—	8	22	30
Totals	152	14	1	—	—	15	137	152

Section VI.—HYGIENE OF CREWS' SPACES.

Regular inspections have been carried out for the detection of nuisances or structural defects on vessels arriving within the Port Sanitary Area, notices being served where such defects were found. In instances where these notices were not complied with, they were followed up by letters to the owners, and particulars forwarded to the Medical Officer of Health at the next port of call.

No defect is written off as complied with until the completed work has been inspected by one of our Inspectors, or we have received notification of completion from the Medical Officer at a subsequent port of call.

In this respect we have enjoyed the co-operation of the Board of Trade, but it is again necessary to point out that the standard enforceable for crews' accommodation upon British ships falls short of that required by many other nations.

The table embodying particulars of inspection during the year is given below :—

	Defects found.	Complied with.
Accumulation of rubbish, stagnant water, etc. ...	2	2
Dampness in crew quarters	2	2
Defective decks, hawse pipes, etc...	12	5
,, doors to crew quarters	2	2
,, doors to w.c.s	3	3
,, seats to w.c.s	6	5
,, soil pipes and pans in w.c.s	2	2
,, stoves	8	6
,, ports	19	11
,, flushing apparatus to w.c.s	5	2
,, steam heater in crews' quarters ...	1	1
Insanitary w.c.s, wash-places, etc.	23	19
,, crew's quarters...	21	19
,, holds and bilges	4	3
Water tanks to be cleansed	7	4
Water tanks, manhole lids to be refitted ...	7	6
Water cask defective	1	1
Food stored in unsatisfactory position	2	2
Ship's stores in crew quarters	2	2
Verminous quarters and bedding	22	16
Totals	151	113
	on 108 Vessels.	on 86 Vessels.

TABLE J.

Nationality of Vessel.	Number Inspected during 1935.	Defects of original construction.	Structural defects through wear and tear.	Dirt, vermin, and other conditions prejudicial to health.
British	1,993	—	43	80
Other nations ...	845	—	14	14

Section VII.—FOOD INSPECTION IN THE PORT.

Report on the Working of the Public Health (Imported Food) Regulations, 1925, the Public Health (Imported Food) Amendment Regulations, 1933, the Public Health (Imported Milk) Regulations, 1926, and the Public Health (Preservatives, etc., in Food) Regulations, 1925 to 1927.

The inspection, examination, and the control of all food stuffs landing in the Port is carried out under the above Regulations, and, as in previous years, the valuable assistance rendered by the Officers of H.M. Customs and Excise, the Southern Railway Company, Shipping Companies, Shipping Agents, Meat and Fruit Importing Companies, has considerably facilitated the carrying out of the varied duties appertaining to the Regulations.

The amount of food stuffs landed in the Port during the year consisted of the following articles :—

FRUIT.—Country of origin : Canary Islands, West Indies, New Zealand, Levant, North and South America, Spain, Continent and Channel Islands, etc., and South Africa.

	Tons.
Apricots	496
Apples	15,073
Bananas	38,208
Cherries	—
Currants	21
Grapes	10,697
Grape Fruit	12,867
Lemons	1,643
Mandarines	127
Melons	209
Naartjes	183
Nectarines	137
Oranges	69,373
Pears	13,957
Peaches	1,328
Pineapples	764
Plums	4,713
Pomegranates	161
Tomatoes	31,024
Fruit, not otherwise specified	894
Total ...	201,875

VEGETABLES.—Country of origin: Continent, Spain, South Africa, Canary Islands, etc.

	Tons.
Beans	905
Broccoli	315
Carrots	23
Onions	3,018
Parsnips	1
Peas	115
Lettuce	32
Vegetables, not otherwise specified	364
Total ...	4,773

FISH.—Country of origin: South Africa, Canada, Continent.—1,421 tons.

MEAT.—Country of origin: South America, New Zealand, Australia, South Africa, etc.

	Tons.
Beef	32,201
Beef Cuts	396
Offal	1,106
Pork Cuts...	146
Sheep and Lambs ...	10,229
Meat, not otherwise specified	85
Total ...	44,163

PROVISIONS.—Country of origin: North and South America, South Africa, Continent, Spain, Canada, etc.

	Tons.
Apple Pomace	—
Apricot Kernels	39
Bacon	355
Beers	257
Coffee	230
Cheese	984
Cider	2
Chicory	—
Cocoa	129
Corn Flakes	310
Confectionery	332
Cereals	622
Chestnuts	425
Canned Goods, not otherwise specified	476
Canned Fruit	1,158
Dried Fruit	4,865
Eggs	3,356
Fruit Pulp	89
Force	116
Fat	499
Grape and Grapefruit Juice	923
Ground Nut Kernels ...	16
Lard	819
Meats, Boxed and Canned	735
Macaroni	3
Milk, Canned	767
Mineral Waters	97
Muffets	—
Oil, Cocoanut	247
,, Olive	34
,, not otherwise specified	1,204
Oatmeal	15
Orange and Lemon Juice	16
Provisions, not otherwise specified	250
Preserves	229
Poultry	31
Quaker Oats	389
Spirits	562
Tea	260
Walnuts	73
Wines	4,683
Total ...	25,597

SUGAR.—Country of origin: United States of America.—321 tons.

BUTTER.—Country of origin: South America, South Africa, Continent, etc.—7,698 tons.

POTATOES.—Country of origin: Continent and Channel Islands, etc.—34,749 tons.

GRAIN AND GRAIN OFFALS.—Country of origin: North and South America, Egypt, Continent, Russia, Australia, Turkey, etc.

	Tons.
Bran	987
Barley	14,018
Buckwheat	30
Cotton Seed	9,157
Dari Seed	—
Flour	3,773
Grits	100
Groats	—
Hominy Chops	100
Linseed Cake	150
Linseed Meal	1,775
Maize	36,660
Maize Meal	1,006
Meal	7,509
Middlings	4,111
Oats	2,317
Oil Cake	202
Pollards	2,500
Rice	15
Seeds	387
Shorts	—
Wheat	44,050
Wheat Germ	534
Grain, not otherwise specified	281
Total	129,662

NOTICES SERVED DURING THE YEAR UNDER THE PUBLIC HEALTH (IMPORTED FOOD) REGULATIONS, 1925.

Form E (Notice for Special Examination)	111
Permission to Remove	95
Notice to Export	16
Form C (Notice to Sort)	6
Permission to Remove after Sorting	6
Form A (Notice to Surrender)	76
Condemnation Notes	75
Condemnation Note with permission to remove for experimental purposes	1

Quantities of Meat Landed in the Port for the Year 1935.

Country of Origin.	Quarters of Chilled Beef.	Quarters of Frozen Beef.	Packages of Beef Cuts.	Carcases of Mutton.	Carcases of Lamb.	Carcases of Pork.	Carcases of Veal.	Packages of Pork Cuts.	Packages of Offal.	Packages of Bacon.
Australia	1,449	5,014	—	4,129	51,739	600	—	—	614	—
Canada	—	—	—	—	—	—	—	—	1,286	3,245
Holland	—	—	—	—	—	—	—	—	—	—
Irish Free State	—	—	—	—	—	—	—	—	—	—
New Zealand	5,706	7,518	—	66,627	455,990	3,123	—	—	2,769	—
South Africa	106,321	41,937	470	—	71	112	502	—	14,497	5
South America	309,125	—	14,023	1,400	53,502	—	—	43	25,713	250
United States of America ...	—	—	—	—	—	—	—	—	—	1,384
Other Countries	—	—	—	—	—	—	—	—	—	—
Totals	422,601	54,469	14,493	72,156	561,302	3,835	502	43	44,879	4,884

(Free from prohibited preservatives.)

Offal.

The customary practice of defrosting a small percentage, in special circumstances, has been carried out, and 1% of all consignments of beef tongues have been defrosted for the detection of Actinomycosis, etc.

Canned Goods.

The importation of canned foods for the year amounted to 120,155 packages.

The inspection of canned foods is generally arranged so as to be coincident with examinations made by the Officers of H.M. Customs and Excise, as numerous consignments are of a dutiable nature ; this method facilitates the working of the Customs and Public Health Regulations.

The Public Health (Imported Milk) Regulations, 1926.

There have been no importations of milk during the year.

Caseous Lymphadenitis.

The examination of mutton and lambs entering the Port has revealed a slight percentage increase of affected carcases over last year's figure ; the incidence of Caseous Lymphadenitis, however, is still very low, and is due to the rigid examination carried out in the countries of origin.

A uniform examination of 5% of consignments of mutton and lambs (42-lbs. in weight and over) is still carried out, and if 2% of the 5% are found to be affected with the disease, the whole of the next consignment is detained until all necessary examinations have been completed. This has been requisite on five occasions.

The above procedure applies to whole carcases only, routine examination of pieces remaining at 100% as formally.

Four thousand six hundred and eighty carcases of mutton and lambs were examined during the year, of these seven carcases were condemned and destroyed by burning.

Country of Origin.	Mutton.				Lambs.			
	Carcases Landed.	Carcases Examined.	Carcases Condemned.	% Affected.	Carcases Landed.	Carcases Examined.	Carcases Condemned.	% Affected.
South Africa ...	...	...	...	...	71	...	...	...
South America...	1,400	72	1	1.3	53,502	596	3	.5
Australia ...	4,129	207	...	...	51,739	47	...	...
New Zealand ...	66,627	3,340	3	.09	455,990	418	...	...
Totals ...	72,156	3,619	4	...	561,302	1,061	3	...

The following samples of imported foodstuffs were taken during the year, for analysis under the Public Health (Preservatives, etc., in Food) Regulations, 1925 to 1927.

No.	Nature of Sample.	Result of Analysis.	Remarks.
1	Pears	0.5 parts per million Arsenious Oxide. 1.4 parts per million permitted.	Consignment released.
2	Pears	0.9 parts per million Arsenious Oxide. 1.4 parts per million permitted.	Exported at owner's request.
3	Pears	1.7 parts per million Arsenious Oxide. 1.4 parts per million permitted.	Consignment exported.
4	Pears	0.4 parts per million Arsenious Oxide. 1.4 parts per million permitted.	Exported at owner's request.
5	Pears	1.1 parts per million Arsenious Oxide. 1.4 parts per million permitted.	Exported at owner's request.
6	Pears	1.1 parts per million Arsenious Oxide. 1.4 parts per million permitted.	Exported at owner's request.
7	Pears	1.7 parts per million Arsenious Oxide. 1.4 parts per million permitted.	Consignment exported.
8	Pears	Arsenious Oxide below tolerance of 1.4 parts per million.	Consignment released.
9	Pears	1.85 parts per million Arsenious Oxide. 1.4 parts per million permitted.	Consignment exported.
10	Pears	Arsenious Oxide below tolerance of 1.4 parts per million.	Consignment released.
11	Pears	0.35 parts per million Arsenious Oxide. 1.4 parts per million permitted.	Exported at owner's request.
12	Pears	0.73 parts per million Arsenious Oxide. 1.4 parts per million permitted.	Exported at owner's request.
13	Apples	0.25 parts per million Arsenious Oxide. 1.4 parts per million permitted.	Exported at owner's request.

No.	Nature of Sample.	Result of Analysis.	Remarks.
14	Pears	0.66 parts per million Arsenious Oxide. 1.4 parts per million permitted.	Exported at owner's request.
15	Pears	0.45 parts per million Arsenious Oxide. 1.4 parts per million permitted.	Exported at owner's request.
16	Pears	1.1 parts per million Arsenious Oxide. 1.4 parts per million permitted.	Consignment released.
17	Apples	1.0 parts per million Arsenious Oxide. 1.4 parts per million permitted.	Consignment released.
18	Apples	2.7 parts per million Arsenious Oxide. 1.4 parts per million permitted.	Consignment exported.
19	Apples	0.33 parts per million Arsenious Oxide. 1.4 parts per million permitted.	Consignment released.
20	Pears	0.33 parts per million Arsenious Oxide. 1.4 parts per million permitted.	Consignment released.
21	Tomato Ketchup ...	Boric Acid—absent. Benzoic Acid—absent. Sulphur Dioxide—88 parts per million.	Sulphur Dioxide in Sauce prohibited. Letter to consignee by Medical Officer; explanation and assurance accepted.
22	Confectionery— Assorted Gums	Sulphur Dioxide—absent. Arsenic—absent.	Sample satisfactory.
23	Sardines	Lead—2.0 parts per million.	Sample satisfactory.
24	Strawberry Pulp ...	Sulphur Dioxide—1,470 parts per million. 2,000 parts per million permitted.	Sample satisfactory.
25	Apples	0.05 parts per million Arsenious Oxide. 1.4 parts per million permitted.	Consignment released.
26	Peeled Tomatoes (Canned)	Copper—absent. Zinc—absent. Lead—absent.	Sample satisfactory.
27	California Pilchards (Canned)	Copper—absent. Lead—absent. Tin—0.5 grains per pound.	Sample satisfactory.
28	Seedless Raisins ...	Sulphur Dioxide—absent. Boric Acid—absent.	Sample satisfactory.

No.	Nature of Sample.	Result of Analysis.	Remarks.
29	Tomatoes	0.5 parts per million Arsenious Oxide.	Consignment released. This sample records the first occasion upon which Arsenious Oxide has been detected on Tomatoes landed at the Port.
30	Tomatoes	0.15 parts per million Arsenious Oxide.	Consignment released.
31	Peeled Tomatoes ...	Copper—absent. Zinc—absent. Lead—absent. Tin—0.04 parts per million.	Sample satisfactory.
32	Milk Powder ...	Moisture—1.65 per cent. Contained added Lactose. Fat—18.3 per cent. Ash—7.0 per cent.	Consignment allowed to proceed to manufacturers.
33	Milk Powder ...	Moisture—1.45 per cent. Fat—26.7 per cent. Ash—6.5 per cent. Contained added iron equivalent to 1.0 per cent. Ammonium Citrate.	Consignment allowed to proceed to manufacturers.

Two samples of condensed milk were taken during the year for Bacteriological examination, with the following results :—

1. Scanty growth of B. Coli Matabilis. Non pathogenic.
2. No growth obtained.

Arsenious Oxide on Fruit.

During the year sixteen notices to export part consignments of South African fruit were served on fruit importers in respect of 2,906 boxes of pears, and 749 boxes of apples, known to be sprayed with arsenious oxide in excess of 1.4 parts per million.

It is the practice of the High Commissioner of South Africa to notify the Ministry of Health, when information has been received by him from the Government laboratories, that over-sprayed fruit has been shipped to this country. The Ministry of Health are then in a position to communicate with the Medical Officers of Health of the ports concerned, where the consignments affected are detained and dealt with on arrival.

The co-operation of the High Commissioner of South Africa and the Ministry of Health has done much to facilitate the detection of over-sprayed fruit, especially during recent years where fruit importations have shown a remarkable increase.

Routine inspection of all fruit consignments arriving from overseas is carried out, and where evidence of spray deposit is observed, samples of the affected fruit are submitted to the Borough Analyst for analysis—generally the consignment from which the sample is taken is detained until the result of the analysis has been known. In all cases where the tolerance figure of 1.4 parts per million of arsenious oxide has been exceeded, notice to export the affected fruit is served on the importer.

During the year 20 samples of fruit were analysed, of these, 4 were found to exceed 1.4 parts per million of arsenious oxide, and the consignments concerned were exported.

Arsenious Oxide on Tomatoes.

No evidence of spray deposit was observed on tomatoes arriving from the Channel Islands.

Consignments imported from the Canary Islands on two occasions showed marked evidence of spray deposit. In both instances samples which were taken from the consignments and submitted to the Borough Analyst, upon analysis revealed a presence of arsenious oxide to the extent of 0.5 parts per million and 0.15 parts per million respectively. The Borough Analyst reported that this was the first occasion that arsenious oxide had been detected on tomatoes. Close observations were made of all subsequent consignments of tomatoes from the Canary Islands, but in all cases no further evidence of spray deposit was detected.

Condemned Food.

The total amount of food condemned for the year was 130 tons, 2 qrs. 16 lbs. In all instances surrenders have been voluntary.

Description.	Original Packages.		Loose Articles.	Weight Condemned.			
	No.	Description.	Description.	Tons.	Cwts.	Qrs.	Lbs.
Apples ...	122	Boxes	quantity of loose	2	7	0	13
Apricots ...	49	Crates	... ...		8	3	0
Apricot Pulp ...	...	...	4 tins			1	0
Bananas ...	...	...	Loose	75	1	0	0
Beef ...	...	...	Part fore quarter and trimmings			2	21
Crabs ...	...	...	loose			1	17
Grapes ...	4	Boxes	... ...			3	10
Grapefruit ...	143	Boxes	... ...	3	13	0	4
Grapefruit Juice	5	Barrels	... ...	1	0	2	0
Cream (Canned)	33	Boxes	... ...		4	3	18
Ham ...	...	...	1 tin				17
Lambs ...	3	Carcases	... ...			4	26
Lemons ...	12	Boxes	... ...		8	2	8
Lettuce ...	87	Crates	... ...		14	0	6
Lobsters ...	...	...	loose		1	0	0
Mutton ...	4	Carcases	... ...			7	11
Offal ...	2	Packages	quantity of loose		1	3	24
Onions ...	...	...	quantity of loose		3	0	0
Oranges ...	684	Boxes	quantity of loose	27	10	2	12
Peaches ...	5	Boxes	... ...			1	7
Pears ...	101	Boxes	... ...	1	17	1	0
Persimmon ...	11	Boxes	... ...		1	0	14
Pineapples ...	354	Crates	... ...	9	18	2	4
Plums ...	1	Box	... ...				14
Pork ...	...	...	1 pig's head ...				8
Potatoes ...	105	Bags	... ...	5	5	0	0
Shrimps ...	4	Boxes	... ...			1	4
Suet ...	...	...	Loose				5
Tomatoes (Canned)	...	...	51 tins ...			1	25
Winkles ...	17	Bags	... ...		17	2	0
Total ...		...	... ...	130	0	2	16

METHOD OF DISPOSAL.

Method of Disposal.	Tons.	Cwts.	Qrs.	Lbs.
Dumped at sea	119	7	2	5
Burned	5	3	0	21
Sold for pig food	5	5	0	0
For analytic and experimental purposes, under guarantee from manufacturers		4	3	18
Total	130	0	2	16

PART II.

PASSENGER TRAFFIC DURING 1935.

The number of vessels entering the Port of Southampton during the year was 15,669, being a decrease of 9 compared with the previous year. The net tonnage of these vessels amounted to 12,040,515 tons, compared with 11,459,546 in the year 1934.

The number of passengers arriving in the Port from countries outside Europe was 75,933, an increase of 8,329 compared with the previous year, and the number embarking was 98,518, an increase of 19,014 compared with the total in 1934.

In addition to the above, 351 vessels arrived in Southampton Water and Cowes Roads to embark and disembark passengers.

The number of passengers landed by tender in the Docks from these vessels amounted to 19,221 during the year.

Eighteen transports also arrived in the Port, and landed 4,052 crew and 24,513 military passengers and troops; the statistics relating to these vessels not being included above.

The passenger traffic during the years 1934 and 1935 between ports in England and places outside Europe, and not within the Mediterranean Sea, is given in the Board of Trade Journal as follows :—

TABLE I.

NUMBER OF PASSENGERS.

Port.	Inward.		Outward.		Total.	
	1934.	1935.	1934.	1935.	1934.	1935.
Bristol ...	2,082	1,806	2,144	1,662	4,226	3,468
Plymouth ...	26,276	29,739	4,071	364	30,347	30,103
Liverpool ...	39,255	34,431	44,628	41,094	83,883	75,525
London ...	44,905	48,376	42,904	43,491	87,809	91,867
Southampton .	67,604	75,933	79,504	98,518	147,108	174,451

The Board of Trade returns (from which the following particulars and tables are obtained) of the passenger movement to and from the United Kingdom, show that the total number of passengers who arrived in the United Kingdom from places out of Europe during the year 1935 amounted to 216,029, an increase of 10,739 compared with the year 1934. The number of passengers who arrived at the Port of Southampton from places out of Europe during the same period amounted to 75,933, an increase of 8,329 compared with the previous year.

The total number of passengers who left various ports in the United Kingdom for places out of Europe amounted to 209,270, an increase of 13,476 compared with 1934. The number of outward passengers who left Southampton for places out of Europe amounted to 95,518, an increase of 19,014 compared with 1934.

The following table shows the total number of passengers who arrived at ports in the United Kingdom from places out of Europe, during the years 1934 and 1935 :—

TABLE II.

Passengers who arrived in the United Kingdom from places out of Europe, distinguishing the class of travel, during the years 1934 and 1935 :—

Ports.		Inward.				
		First Class.	Second Class.	Tourist Class.	Third Class.	Total.
Liverpool	1935	5,337	8,267	9,312	11,515	34,431
	1934	5,770	9,536	10,221	13,728	39,255
London	1935	18,500	8,640	12,805	8,431	48,376
	1934	17,672	9,039	9,223	8,971	44,905
Plymouth	1935	11,331	8,443	6,367	3,598	29,739
	1934	9,440	8,571	4,857	3,408	26,276
Southampton ...	1935	26,537	8,086	29,226	12,084	75,933
	1934	24,835	6,943	17,467	18,359	67,604
Bristol	1935	1,739	57	10	—	1,806
	1934	2,055	25	—	2	2,082
Glasgow	1935	508	1,784	6,129	9,190	17,611
	1934	494	1,534	6,098	9,572	17,698
Londonderry ...	1935	24	25	272	982	1,303
	1934	38	59	373	1,153	1,623
Belfast	1935	93	505	1,492	2,884	4,974
	1934	104	290	1,131	2,641	4,166
Other Ports	1935	1,445	187	52	172	1,856
	1934	1,215	160	58	248	1,681
Total, all Ports...	1935	65,514	35,994	65,665	48,856	216,029
	1934	61,023	36,157	49,428	58,082	205,290

TABLE III.

Passengers who left the United Kingdom for places out of Europe, distinguishing the class of travel, during the years 1934 and 1935 :—

Ports.		Outward.				
		First Class.	Second Class.	Tourist Class.	Third Class.	Total.
Liverpool	1935	12,621	10,465	9,197	8,811	41,094
	1934	12,555	12,302	10,357	9,414	44,628
London	1935	20,381	6,478	12,207	4,425	43,491
	1934	20,259	7,017	9,143	6,485	42,904
Plymouth	1935	120	127	70	47	364
	1934	1,315	1,228	1,278	250	4,071
Southampton ...	1935	29,861	17,531	34,557	16,569	98,518
	1934	25,752	12,953	24,258	16,541	79,504
Bristol	1935	1,628	33	—	1	1,662
	1934	2,144	—	—	—	2,144
Glasgow	1935	565	1,508	5,995	6,434	14,502
	1934	506	1,413	5,865	6,440	14,224
Londonderry ...	1935	38	6	298	828	1,170
	1934	22	35	366	1,009	1,432
Belfast	1935	44	598	1,403	2,243	4,288
	1934	83	242	1,157	1,982	3,464
Other Ports	1935	3,209	685	100	187	4,181
	1934	2,489	662	71	161	3,383
Total, all Ports...	1935	68,467	37,431	63,827	39,545	209,270
	1934	65,125	35,852	52,495	42,282	195,754

NOTE.—The figures given in the above table are exclusive of the number of persons travelling on pleasure cruises between the United Kingdom and places out of Europe, as particulars of the class of travel of these passengers are not required to be furnished.

Of the total of 425,299 passengers outward and inward in 1935, 41 per cent. were recorded at Southampton, 22 per cent. at London, and 18 per cent. at Liverpool, as compared with percentages of 37, 22, and 21 respectively in 1934. The number of passengers now using Southampton as their port of embarkation or arrival is over twice as great as the number commencing or terminating their voyages at Liverpool.

In 1923 the ports were on an approximate equality in this respect. The recent decline in the relative importance of Liverpool is due in part to the practical cessation of emigration to North America. Glasgow accounted for about $7\frac{1}{2}$ per cent. of the total in 1935, and 8 per cent. in 1934. About 14 per cent. of the total number of inward passengers in 1935 disembarked at Plymouth, as compared with about 13 per cent. in 1934. Of the numbers travelling on pleasure cruises to places outside Europe, about three-quarters in both years embarked at Southampton or Liverpool, and most of the remainder at London.

CLASS OF TRAVEL.—The aggregate number of passengers (outward and inward) travelling in the first, second, tourist and third class represented about $31\frac{1}{2}$, 17, $30\frac{1}{2}$ and 21 per cent. respectively of the total traffic in 1935, as compared with $31\frac{1}{2}$, 18, $25\frac{1}{2}$ and 25 per cent. respectively in 1934. It will be seen from these percentages, and from the table above, that the increase in the aggregate number of passengers carried was due to the substantially larger numbers travelling in the tourist class, the increase in this class being partly offset by a considerable reduction in the numbers travelling third class; in each case the change was primarily in respect of the inward traffic. There was an appreciable increase in the number of first class passengers.

Passengers Travelling in Foreign Ships.

Non-European Countries.

The number of outward and inward passengers (British and aliens) who travelled between the United Kingdom and places outside Europe by vessels under foreign flags in 1935 was 80,622, or 16.2 per cent. of the total passenger movement, as compared with 64,640 (13.2 per cent.) in 1934. Excluding persons travelling on pleasure cruises, the proportion carried by vessels under foreign flags was 14 per cent. in 1933, 16½ per cent. in 1934, and 19 per cent. in 1935. The increase which has been taking place for a number of years in the proportion of passengers travelling in foreign ships—it was under 8 per cent. ten years ago—has been due to an absolute decline, largely associated with the emigrant traffic, in the numbers travelling in British ships, and in part to some increased preference for travel in the large German and French liners. The numbers travelling by vessels under foreign flags in 1935 were over 10,000 in excess of those for any year since 1927, the first year for which such particulars are available.

Passenger Movement between the United Kingdom and the Continent.

For the present purpose, movement to and from the Channel Islands and all ports within the Mediterranean Sea is grouped with movement to and from the "Continent"; and the latter expression is used with that connotation throughout this section. It may be noted that the passenger movement, by ship direct, between the United Kingdom and ports on the Mediterranean and Black Sea is only about 1 per cent. of the total movement between the United Kingdom and the Continent, as above defined. Some information as to the passenger traffic with the Channel Islands is given below.

The following table shows the number of passengers of all nationalities who left the United Kingdom for the Continent, and the number who arrived in the United Kingdom from the Continent, including the numbers travelling on pleasure cruises to the Mediterranean and to other parts of Europe, in each of the years 1933, 1934, and 1935, distinguishing the number of persons who travelled by sea and by air, and showing the principal British ports of arrival and departure.

TABLE IV.

Passengers by Sea and Air between the United Kingdom and the Continent (including the Channel Islands).

Port.	Total Number of Passengers.					
	Outward.			Inward.		
	1935.	1934.	1933.	1935.	1934.	1933.
Principal Channel Ports:						
Dover	384,734	313,992	310,707	391,107	318,413	317,947
Folkestone	185,846	169,196	162,777	204,598	192,622	163,766
Southampton ...	145,147	146,536	152,221	154,927	155,274	161,778
Newhaven	104,055	104,342	106,252	105,454	106,131	107,704
Weymouth	56,004	57,980	61,977	54,278	55,639	58,240
Other Ports:						
Harwich	166,625	159,062	142,222	164,639	155,235	141,553
London	61,570	62,107	61,193	61,195	64,555	61,733
Liverpool	17,032	21,367	22,498	15,246	20,539	21,388
Tyne Ports	16,860	15,977	14,584	16,789	16,102	14,671
Hull	11,527	11,108	8,674	12,448	11,472	9,610
Other	120,635	86,506	87,731	115,401	84,408	85,193
Air Stations*	75,705	62,140	45,440	79,371	63,188	46,763
1st Quarter	130,716	148,988	115,602	142,751	136,408	118,659
2nd ,, ...	309,676	268,125	276,267	312,293	292,853	288,044
3rd ,, ...	735,665	628,784	628,931	758,059	666,739	634,808
4th ,, ...	169,683	164,416	155,476	162,350	147,578	148,835
Total ...	1,345,740	1,210,313	1,176,276	1,375,453	1,243,578	1,190,346

* As reported by the Air Ministry.

Traffic at Individual Ports.—The five ports on the English Channel which are separately specified in the above table accounted for about 66 per cent. of the entire passenger movement to and from the Continent in 1935, while nearly 28 per cent. of the outward and inward passengers embarked or disembarked at the port of Dover alone. Compared with 1934 there was a marked increase (143,400, or nearly 23 per cent.) at Dover, the movement to and from Ostend increasing from about 300,000 to 455,000. Other important increases were 28,600 at Folkestone and 17,000 at Harwich, while decreases were recorded at Liverpool (9,600) and London. The figure for "other" ports shows an increase of 65,100, mainly due to the increased number making day-trips to the Continent. The number of passengers who were carried to and from Calais and Boulogne *via* Dover and Folkestone showed a small decrease in 1935, as compared with 1934, the figures being as follows :—

Outward.		Inward.	
1935.	1934.	1935.	1934.
318,272	322,165	334,687	335,157

The numbers of passengers who were carried to and from the Channel Islands *via* Southampton and Weymouth by sea, and the numbers carried by air, in 1935 and 1934 were as follows :—

Port.	Outward.		Inward.	
	1935.	1934.	1935.	1934.
Southampton ...	84,115	88,421	86,548	91,320
Weymouth ...	54,399	57,020	51,362	53,204
Air Stations* ...	14,104	10,264	12,401	9,544

*As reported by the Air Ministry.

The number of passengers to the Channel Islands increased in 1932 and 1933, but in 1934 there was an appreciable decrease in the numbers embarking and disembarking at both Southampton and Weymouth. These decreases were partially offset by an expansion in the traffic by air.

TABLE V.

RETURN OF SHIPS' TONNAGE, PASSENGER ARRIVALS, ETC., FOR THE YEARS, 1926-1935.

(This table is supplied by H.M. Customs).

Year.	Number of Arrivals from Foreign Ports.	Number of Arrivals from Home Ports (Coasters).	Number of Passengers arriving at the Port from Ports other than Jersey.	Number of Passengers arriving from Jersey.	Number of Crews Arriving.	Number of Ships of 2,000 Tons and upwards.	Number of Ships under 2,000 Tons (including Coasters).	Net Tonnage of Vessels entering the Port.
1926	3,191	10,152	174,679	41,309	343,976	854	12,489	9,861,178
1927	3,352	11,060	190,931	53,423	337,142	910	13,502	9,669,794
1928	3,344	12,195	199,579	58,343	400,905	984	14,555	10,975,616
1929	3,285	11,988	199,261	68,559	384,023	1,014	14,259	11,317,862
1930	3,198	12,436	207,808	77,914	484,869	1,034	14,600	11,506,830
1931	3,071	12,208	186,138	81,228	309,156	989	14,290	11,153,185
1932	2,528	12,447	168,335	91,652	400,410	900	14,071	10,116,279
1933	2,485	12,987	174,998	95,876	407,376	1,021	14,451	11,450,971
1934	2,572	13,106	185,033	91,320	409,187	1,048	14,630	11,459,546
1935	2,574	13,095	194,516	82,760	547,455	1,079	14,590	12,040,515

The above figures include Troops and Passengers arriving by H.M. Transports.

TABLE VI.

Statistical summary of ships, passengers, crew, and net tonnage of vessels entering the Port of Southampton from 1911 to 1935 :— (Compiled from H.M. Customs Returns).

Year.	Number of Ships arrived from		Total number of Passengers landed from the Continent of Europe (including Jersey) and Foreign Countries.	Number of Crew landed.	Net Tonnage of Vessels entering the Port.
	Foreign.	Home Ports.			
1911	2,783	11,446	175,113	167,642	6,514,152
1912	2,724	11,173	173,266	167,556	7,021,578
1913	2,979	11,515	206,545	179,816	7,939,869
1914	2,296	5,617	136,089	128,731	4,674,696
1919	1,369	6,697	113,413	144,501	2,191,329
1920	2,258	8,007	161,306	154,541	3,327,754
1921	2,270	8,127	208,680	187,767	5,347,766
1922	2,470	9,071	216,869	187,296	7,646,502
1923	3,044	7,048	236,644	320,453	9,350,234
1924	3,088	7,066	233,218	309,926	9,548,984
1925	3,186	11,420	262,397	335,453	9,989,300
1926	3,191	10,152	215,988	343,976	9,861,178
1927	3,352	11,060	244,354	337,142	9,669,794
1928	3,344	12,195	257,922	400,905	10,975,616
1929	3,285	11,988	267,850	384,023	11,317,862
1930	3,198	12,436	285,722	484,869	11,506,830
1931	3,071	12,208	267,366	309,156	11,153,185
1932	2,528	12,447	259,987	400,410	10,116,279
1933	2,485	12,987	270,874	407,376	11,450,971
1934	2,572	13,106	276,353	409,187	11,459,546
1935	2,574	13,095	277,276	547,455	12,040,515

INFECTIOUS DISEASE.

The cases of infectious disease reported by vessels on arrival at Southampton are shown in Table VII, which includes all cases reported on the bills of health on both H.M. Transports and other vessels.

Many of the cases reported on Transports were cases from India, China, and the Mediterranean stations, and these cases proceeded to Netley Hospital or Haslar Hospital for discharge, on furlough, or otherwise.

The following table shows the disposal of cases of infectious diseases landed at this Port, and to which of the Town Council's Hospitals the case was removed :—

	Cases Notified.	Cases removed to Isolation Hospital.	Cases removed to Borough Hospital.
Scarlet Fever	17	11	—
Diphtheria	9	5	—
Enteric Fever and Para-Typhoid	21	6	1
Pneumonia	29	—	2
Measles	48	12	—
Tuberculosis	109	—	2
Chicken Pox	22	3	—
Venereal Disease	70	—	7
Mumps	10	1	—
Malaria	14	—	1
Influenza	61	—	3
Pyrexia of unknown origin ...	2	—	1
Tonsillitis	19	—	4
Erysipelas	3	—	1
Poliomyelitis	3	1	—
Encephalitis Lethargica ...	2	1	—
Totals	439	40	22

The above cases are included in the total of infectious cases reported by vessels which arrived in the Port shown in Tables VII and VIII.

PLAGUE, CHOLERA, YELLOW FEVER and TYPHUS.

No case or suspected case of the above diseases occurred upon any vessel using this Port during the year, and no plague-infected rats were discovered.

OTHER INFECTIOUS DISEASES.

SMALL POX.

The S.S. "Empress of Britain" arrived here on 28th May from a world pleasure cruise, and reported that a case of Small Pox had occurred, and was landed at Singapore on the 5th March, 1935. Previous to arriving at Singapore, she had called at Bombay, *via* Colombo and Penang.

There were no further cases amongst the crew or passengers.

When she arrived at this Port, 85 days had elapsed since the case had occurred—nevertheless, the ship's officials reported this one case, although it had not occurred during the last six weeks of the voyage.

All the necessary precautions as regards vaccination and disinfection had been carried out previous to arrival in this country.

Reference Records.

A card index system has been introduced regarding cases of disease occurring on vessels using this Port. A separate card is made out for each vessel, upon which particulars regarding the condition of health on board is noted whenever the vessel enters the Port. By this means the medical history of any individual ship is made available to the Medical Officer at a moment's notice.

TABLE VII. INFECTIOUS AND OTHER DISEASES.

Table showing the number of cases reported on vessels arriving in the Port of Southampton, and how they were dealt with during the year 1935 :—

Disease.	How dealt with.							
	Total Cases reported.	Removed to Borough Hospitals or Nursing Homes.	Removed to Naval or Military Hospitals.	Landed at other Ports before arriving at Southampton.	Proceeded in Vessels to other Ports.	Landed at Southampton, but did not proceed to Hospital.	Died at Sea.	Convalescent on Arrival.
Accidents	25	12	...	...	2	6	5	...
Apoplexy	4	1	...	...	...	...	3	...
Appendicitis	13	5	...	3	...	5	...	...
Blackwater Fever ...	1	...	...	...	...	...	1	...
Bronchitis	15	8	...	...	1	6	...	...
Cancer	4	...	...	...	...	1	3	...
Cellulitis	7	7	...	...	...	...	...	...
Chicken Pox	22	3	...	4	...	13	...	2
Diarrhœa	86	1	...	...	...	56	...	29
Diabetes	2	...	...	...	...	...	2	...
Diphtheria	9	5	...	2	...	1	1	...
Dysentery	21	1	14	1	...	3	...	2
Eczema	7	2	5	...	...	...	...	...
Empyema	2	1	...	...	...	...	1	...
Encephalitis Lethargica	2	1	...	...	...	...	1	...
Enteric Fever and Para-Typhoid Fever	21	8	1	5	1	5	...	1
Erysipelas	3	1	...	...	...	1	...	1
Gastritis	10	9	...	...	1	...	...	...
German Measles... ...	9	1	...	2	3	1	...	2
Glandular Swellings ...	4	2	1	...	...	1	...	...
Heart Disease	29	4	...	...	1	1	23	...
Influenza	61	3	...	...	4	1	...	53
Insanity	17	5	...	...	2	10	...	...
Malaria	14	1	6	...	4	...	...	3
Measles	48	12	...	5	2	14	...	15
Mumps	10	1	...	1	...	4	...	4
Nephritis...	6	1	...	...	...	...	5	...
Poliomyelitis	3	1	1	...	...	1	...	...
Pleurisy	7	6	...	...	...	1	...	...
Pneumonia	29	6	10	2	...	2	7	2
Pyelitis	1	1	...	...	...	...	...	...
Pyrexia	2	1	1	...	...	...	...	...
Rheumatism	7	5	...	...	1	1	...	...
Scarlet Fever	17	11	...	4	...	2	...	...
Small Pox	1	...	...	1	...	...	...	...
Septicæmia (Streptococc'l)	1	...	...	...	...	...	1	...
Tonsillitis	19	3	1	1	4	9	1	...
Tuberculosis	109	5	77	3	2	21	1	...
Venereal	70	6	24	1	12	27	...	...
Whooping Cough ...	11	...	...	1	2	7	...	1
Other Diseases	31	16	...	...	3	9	3	...
Totals ...	760	156	141	36	45	209	58	115

TABLE VIII.

INFECTIOUS DISEASES.

Reported by vessels arriving in the Port of Southampton during the 10 years 1926—1935 :—

Disease.	1926	1927	1928	1929	1930	1931	1932	1933	1934	1935
Cerebro-Spinal Fever	...	2	...	1	4	1	...	...	...	...
Cholera	...	...	...	...	...	...	...	...	...	...
Diphtheria	18	11	8	10	13	12	12	3	6	9
Enteric Fever and Para-Typhoid Fever	46	31	66	51	27	21	20	13	13	21
Measles	54	51	65	40	43	28	38	29	36	48
Plague...	...	...	...	...	...	...	...	...	...	...
Scarlet Fever ...	5	10	9	13	6	10	15	6	3	17
Small Pox	3	1	2	...	...	...	4	1	...	1
Tuberculosis	183	174	200	137	183	133	162	149	109	109
Typhus Fever ...	...	...	...	...	...	...	...	...	...	...

DEATHS AT SEA.

Fifty-eight deaths were reported to have occurred on vessels on their voyage to Southampton, and were buried at sea:—

Accidents	5	Heart Disease	23
Apoplexy	3	Nephritis	5
Blackwater Fever ...	1	Pneumonia	7
Cancer	3	Septicæmia, streptococcal	1
Diabetes	2	Tonsillitis	1
Diphtheria	1	Tuberculosis	1
Empyema	1	Other Diseases	3
Encephalitis Lethargica	1		

FUMIGATION OF VESSELS.

During the year fumigation was carried out on 15 vessels, six with Liquid Hydrocyanic Acid Gas, three with Liquid Hydrocyanic Acid Gas combined with Discoids, one Liquid Hydrocyanic Acid Gas—Galardi process, and one with Sulphur.

Shipping companies make their own arrangements with firms specialising in the work, which is done under the supervision of the Port Sanitary Staff.

TABLE IX.

FUMIGATION OF VESSELS.

The following table gives particulars of the vessels fumigated under the supervision of the Port Sanitary Authority.

Date.	Vessel.	Fumigant used.	Rats found after Fumigation.
Jan. 5	"Berengaria"	Zyklon B	Nil
,, 9	"Majestic"	Zyklon B	4
,, 11	"Arandora Star" ...	H.C.N. Liquid ...	Nil
,, 15	"Homeric"	Zyklon B	Nil (13 Mice)
Mar. 16	"Princess Olga" ...	H.C.N. Liquid ...	Nil
,, 29	"Vinemoor"	Sulphur	Nil
Apr. 11	"Arandora Star" ...	H.C.N. Liquid ...	Nil
,, 20	"Alcantara"	H.C.N. Liquid (Galardi)	Nil
June 3	"Neuralia"	H.C.N. Liquid ...	Nil
,, 5	"Nevasa"	H.C.N. Liquid ...	Nil
Sept. 24	"Erin"	H.C.N. Liquid and Discs	9
Nov. 23	"Franconia"	H.C.N. Liquid and Discs	Nil
,, 30	"Empress of Britain"...	H.C.N. Liquid ...	Nil
Dec. 21	"Berengaria"	H.C.N. Liquid and Discs	Nil
,, 21	"Empress of Australia"	H.C.N. Zyklon B ...	Nil
	Total—15 Vessels.	6 H.C.N. (Liquid) 4 H.C.N. (Zyklon B) 3 H.C.N. (Liquid and Discs) 1 H.C.N. (Liquid) Galardi 1 Sulphur	13 Rats and 13 Mice

TRANSPORTS.

Eighteen transports arrived at Southampton during the year, and all vessels on the "infected" list were boarded and examined on arrival, in conjunction with the naval and military authorities at this Port. Details of the ships are shown in Table X.

TABLE X.

Statement showing the number of H.M. Transports which arrived in the Port during the year 1935, the ports from which they arrived, and the number of military passengers and troops landed at Southampton.

Date.	Vessel.	Whence.	Crew.	Troops and Passengers.
1935. Jan. 10	"Somersetshire" ...	Hong Kong ...	287	1,584
,, 13	"Dorsetshire" ...	Chingwangtao	189	1,697
,, 13	"Lancashire" ...	Karachi ...	209	1,586
,, 28	"Nevasa"	Malta ...	237	1,257
Feb. 5	"Neuralia"	Bombay ...	237	1,571
Mar. 15	"Dorsetshire" ...	Karachi ...	188	1,737
,, 28	"Nevasa"	Bombay ...	237	1,501
,, 29	"Lancashire" ...	Karachi ...	209	1,511
Apr. 4	"Neuralia"	Bombay ...	236	1,070
,, 7	"Somersetshire" ...	Hong Kong ...	188	1,357
May 2	"Lancashire" ...	Alexandria ...	286	1,388
July 6	"Karanja"	Bombay ...	210	872
Oct. 13	"Dorsetshire" ...	Jamaica ...	187	1,176
Nov. 4	"Cameronia" ...	Aden	265	1,054
,, 6	"Neuralia"	Malta ...	273	544
,, 25	"Somersetshire" ...	Alexandria ...	188	1,510
Dec. 1	"Nevasa"	Bombay ...	235	1,465
,, 3	"Dorsetshire" ...	Karachi ...	191	1,633
	18		4,052	24,513

DISINFECTION.

Disinfection was carried out by the Port Sanitary Authority on 83 vessels, and 5,146 articles of bedding and other effects, including 17 packages of passengers' effects, were removed to the Disinfecting Station at West Quay or to the Isolation Hospital.

Ten contacts with infectious disease were bathed and disinfected at West Quay, St. Mary's Institution, and the Isolation Hospital.

OIL TANKERS.

During the year one hundred and sixty-seven oil tankers arrived in Southampton Water to discharge or load oil fuel or spirit at the oil wharves at Fawley or Hamble.

The vessels came from the following ports :—

Abadan	...	...	18
Aruba	...	...	26
Antibes	...	...	1
Baytown	...	...	3
Balik Papam	...	...	1
Baton Rouge	...	...	1
Bayonne	...	...	2
Curacao	...	...	23
Constanza	...	...	7
Concarneau	...	...	2
Cimarebo	...	...	1
Danzig	...	...	1
Foynes	...	...	2
Gibraltar	...	...	1
Hamburg	...	...	3
Hellerup	...	...	1
Houston	...	...	1
Havre	...	...	2
Las Piedras	...	...	4
La Lebistad	...	...	1
Malmo	...	...	1
Minititilan	...	...	1
Nantes	...	...	1
Oxelsund	...	...	1
Oran	...	...	1
Oslo	...	...	1
Osterlin	...	...	1
Pasajes	...	...	1
Pto. Mexico	...	...	2
Port Jerome	...	...	2
Rouen	...	...	7
Rotterdam	...	...	2
Stettin	...	...	3
Svolvaer	...	...	1
Stockholm	...	...	1
San Pedro	...	...	5
St. Malo	...	...	1
Talara	...	...	20
Tampico	...	...	11
Trinidad	...	...	3
Total	...		167

General Summary of Inspections carried out by the Port Sanitary Staff, and other Statistics, during the Year 1935.

Steamers (from foreign) visited	1,429
Motor vessels (from foreign) visited	321
Sailing vessels (from foreign) visited	1
Steamers (from coastwise) visited	772
Motor vessels (from coastwise) visited	259
Sailing vessels (from coastwise) visited	56
Total steam, motor and sailing vessels visited ...	2,838
Number of British vessels visited	1,993
Number of British vessels re-visited	2,007
Number of foreign vessels visited	845
Number of foreign vessels re-visited	146
Total vessels visited 2,838. Total vessels re-visited 2,153 Total ...	4,991
Number of vessels found in satisfactory sanitary condition	2,730
Number of vessels found in defective sanitary condition	108
Number of crew arriving (from foreign)	389,206
Number of passengers arriving (from foreign), including troops	352,869
Number of crew arriving (from coastwise)	37,569
Number of passengers arriving (from coastwise) ...	17,703
Total number of crew and passengers arriving (including troops)	797,347
Number of passengers landed from 106 tenders in Southampton Water	2,563
Number of passengers landed from 245 tenders in Cowes Roads and Stokes Bay	16,658
Total number of passengers landed from 351 tenders ...	19,221
Number of rats captured, examined, and destroyed ...	1,017
Number of vessels on which Rat Orders were served ...	151
Number of rats found on 145 vessels from plague-infected ports	48
Number of vessels where disinfection was carried out ...	83
Number of articles of bedding, etc., including 17 packages of effects disinfected	5,146
Number of contacts bathed and disinfected	10

TABLE XI.

Showing number of vessels inspected, including re-visits, with percentage of defects.

Year.	Vessels from Foreign visited.	Coasting Vessels visited.	Total Inspections.	Number found defective.	Percentage defective.
1926	3,124	776	3,900	32	1.15
1927	3,510	948	4,458	44	1.44
1928	3,851	783	4,634	53	1.95
1929	3,818	670	4,488	92	3.54
1930	3,923	775	4,698	77	2.78
1931	4,362	1,357	5,719	99	3.09
1932	4,140	1,163	5,303	115	3.16
1933	3,828	1,409	5,237	126	4.29
1934	3,726	1,412	5,138	131	4.39
1935	3,727	1,264	4,991	108	3.80

TABLE XII.

Table showing the number of vessels visited, showing nationality, description and number defective during 1935, not including re-visits.

Nationality.	Steam.	Motor.	Sail.	Total.	Defective.
American	65	...	...	65	...
Belgian	2	...	...	2	...
British	1,620	317	56	1,993	91
Danish	8	29	...	37	2
Dantzig, Free State of...	3	7	...	10	...
Dutch	46	146	...	192	2
Esthonian	2	...	...	2	2
Finnish	1	...	...	1	...
French	53	14	1	68	1
German	311	27	...	338	...
Greek	2	...	...	2	...
Icelandic...	2	...	...	2	...
Italian	1	2	...	3	1
Latvian	1	1	...	2	...
Norwegian	57	24	...	81	5
Panamanian	...	9	...	9	...
Russian	1	...	...	1	1
Spanish	2	...	...	2	...
Swedish	23	4	...	27	3
Yugo-Slavian	1	...	...	1	...
Totals ...	2,201	580	57	2,838	108

ALIENS' ORDER, 1920.

The introduction of the Aliens' Order in 1920 necessitates that a Medical Officer be available for duty when passengers conveyed by steamers are landed at the Port, since Southampton is one of the approved ports at which aliens may land.

Many aliens arrive from the Continent by Channel steamers which arrive daily in the summer months between 6 a.m. and 7 a.m.; other Steamship Companies who land aliens are the Royal Mail Lines, Cunard White Star, Red Star Line, Union-Castle Company, etc., the vessels making regular calls at the Port, but at uncertain hours.

The inspection of aliens is carried out on board the large vessels on their arrival, those aliens requiring a more detailed medical examination being sent ashore to a room specially provided in the Docks.

The following figures show the amount of work carried out in connection with the inspection of aliens during the year :—

1.	(*a*) Total number of aliens (excluding alien seamen) landed at the Port	39,914
	(*b*) Aliens refused permission to land by Immigration Officer	102
	(*c*) Transmigrants	2,147
	(*d*) Total number of aliens arriving in the Port ...	42,163
	(*e*) Number inspected by Medical Inspector ...	40,908
	(*f*) Number subjected to detailed examination by Medical Inspector	566
2.	Certificates issued :—	
	(*a*) Lunatic, idiot, or mentally defective	4
	(*b*) Undesirable for medical reasons	4
	(*c*) Physically incapacitated	1
	(*d*) Suffering from acute infectious disease	9
	(*e*) Landing necessary for adequate medical examination	—
3.	(*a*) Total number of vessels carrying alien passengers	1,670
	(*b*) Number of such vessels dealt with by Medical Inspector	1,106

TABLE A.

Analysis of aliens landed.

Residents returning	1,554
In transit	3,610
Visitors	29,149
Business	3,445
Diplomatic	547
Seamen	67
Contract seamen	479
Ministry of Labour Permit (M.L.) :—	
(*a*) Males	355
(*b*) Females	426
(*c*) Children	15
Aliens coming to settle not holding M.L. permits :—	
(*a*) Males	332
(*b*) Females	370
(*c*) Children	111

TABLE B.

Classification of aliens referred to the Medical Inspector by the Immigration Officer for detailed examination.

(i)	Holding Ministry of Labour permits	311
(ii)	Intending to take up employment and remain in the country over three months	69
(iii)	Intending to make their home in the country ...	45
(iv)	Students coming for educational purposes	13
(v)	In regard to whom there is any mention of health as a reason for their visit	9
(vi)	Who appear to the Immigration Officer:—(*a*) Not to be in robust health; (*b*) to be mentally or physically abnormal or sub-normal; (*c*) to be dirty in their person, or (*d*) are selected for special reasons	40
vii)	Seamen travelling as passengers	63
viii)	Number of certificates issued...	—

TABLE XIII.

Table showing for comparison the food stuffs condemned during the years 1910 to 1935 :—

	Tons.	Cwts.	Qrs.	Lbs.
1910	137	6	2	25
1911	115	4	0	25
1912	96	15	3	25
1913	99	15	1	5
1914	53	11	0	19
1915	22	18	1	4
1916	28	4	3	25
1917	586	7	2	8
1918	538	9	0	7
1919	79	15	3	6
1920	324	1	0	4
1921	91	8	3	22
1922	30	8	0	10
1923	26	9	1	22
1924	80	5	0	27
1925	158	0	2	19
1926	90	10	2	15
1927	58	2	3	24
1928	129	15	3	18
1929	97	12	0	4
1930	136	18	2	27
1931	136	0	2	9
1932	230	4	1	26
1933	80	2	1	26
1934	118	2	2	5
1935	130	0	2	16

INDEX.

BOROUGH REPORT.

	PAGE.
Ambulance	29
Analyst	31
Ante-natal Clinics	74
Births	38, 41, 52
Borough Hospital	6, 28, 146–152
Cancer	142–143
Cerebro-Spinal Fever	100
Children and Young Persons Acts, 1908–1932 ...	170–171
Clinics	30
Cod Liver Oil, Grant of	82–83
Common Lodging Houses	204
Deaths	39–52
Diphtheria	4, 96–97, 155
Diphtheria, Immunisation	97–99
Disinfecting Station	193
Dispensing	86
Drainage and Building Bye-laws	194–195
Enteric Fever	100, 156
Factory and Workshop Acts	204–211
Food Inspection	196–199
Food and Drugs (Adulteration) Act, 1928... ...	198–199
General Observations (Medical Officer of Health) ...	3–19
Health Services	28–31
Health Visiting...	77, 80–81
Health Week	87–89
Home Helps	65–67
Houses Erected	187
Houses let in Lodgings	204
Housing	7, 176–190
Infant Clinic	75–76
Infantile Mortality	53–55
Infectious Diseases	30, 92–100
Influenza and Pneumonia	100

INDEX—continued.

	PAGE.
Insurance Scheme	61–62
Isolation Hospitals	6, 28–29, 153–156
Laboratories	110, 157–158
Local Acts	31
Maternal Mortality	21, 60
Maternity and Child Welfare	8–10, 60–83
Maternity Home	74
Maternity Unit	9, 29, 58–59
Mental Deficiency (Institutional Provision) ...	160–162
Mental Treatment Act, 1930	166–167
Mental Welfare Association	163–165
Merchandise Marks Act, 1926	194
Meteorology	24–25
Midwives	8–9, 30, 62–65
Milk—Free	81–83
Milk and Dairies (Consolidation) Act, 1915 ...	200–203
Mortuary, New	7, 32
Nursing Homes Registration Act, 1927	31, 67
Offensive Trades	195
Ophthalmia Neonatorum	70–73
Orthopædic Clinic and Treloar's Hospital	83–86
Population	24
Puerperal Fever and Pyrexia	68–69
Rats and Mice Destruction	193–194
Rag Flock Acts, 1911 and 1928	208
Sanitary Circumstances of District	33–35
Sanitary Inspection	7, 192–193
Sewage Disposal	33–35
Scarlet Fever	94–96, 155
Shell Fish Regulations	5
Shops Act, 1912 to 1934	209
Slaughterhouses	196
Southampton Crematorium	173–174
Sydney House Clinic	78–79
Statistical Summary	20–21
Tuberculosis	12–15, 29, 30, 113–141

INDEX—continued.

PAGE.

Tuberculosis Pavilion 14, 112
Vaccination 171–172
Venereal Diseases 10–12, 30, 77, 102–110
Water Supply from Wells 33
Welcomes 30, 74–75, 79–80

PORT SANITARY REPORT.

Part I.

Food Inspection 18, 234–245
Hygiene of Crews' Spaces 233–234
Infectious Diseases 226–227
Limits of Jurisdiction 15–16, 212–215
Port Sanitary Regulations, 1933 ... ... 17, 218–224
Port Sanitary Service 15–19
Psittacosis 18, 225
Rodents, Measures against 18, 228–232
Shipping entering the Port 216
Trade of the Port 217
Water Supply, Source of 217–218

Part II.

Aliens' Order, 1920 262–263
Deaths at Sea 256
Disinfection 259
Food Stuffs condemned 264
Fumigation of Vessels 256–257
Infectious Diseases 253–256
Inspections carried out 260–261
Oil Tankers 259
Passenger Traffic 246–252
Transports 257–258